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| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | ☐ Chapter 7                   |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ■ Chapter 13                  | ☐ Check if this an amended filing |

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself   |   |   |
|-----|--|---|---|
|     |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):                     |
| 1.  | Your full name   |   |   |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | Monica First name  D Middle name  Fouche Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., II, III) |
|     |  |   |   |
| 2.  | All other names you have used in the last 8 years  |   |   |
|     | Include your married or maiden names.  |   |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-1853   |   |

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Case number (if known)

Debtor 1 Monica D Fouche

|    |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|--|---|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs.  Business name(s)  EINs   | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 10041 S. Walnut Terrace<br>Unit 206  | If Debtor 2 lives at a different address:   |
|    |  | Palos Hills, IL 60465 Number, Street, City, State & ZIP Code  Cook County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.    |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code   | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)                                      | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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Case number (if known)

Document Debtor 1 Monica D Fouche

| 7.  | The chapter of the Bankruptcy Code you are                                   |              |                                 |   | each, see <i>Notice Re</i><br>age 1 and check the |  | C. § 342(b) for Individu | uals Filing for Bankruptcy  |
|-----|--|--------------|---------------------------------|---|---|--|--------------------------|---|
|     | choosing to file under   | ☐ Cha        | pter 7                          |   |   |  |                          |   |
|     |  | ☐ Cha        | pter 11                         |   |   |  |                          |   |
|     |  | ☐ Cha        | pter 12                         |   |   |  |                          |   |
|     |  | ■ Cha        | pter 13                         |   |   |  |                          |   |
| 8.  | How you will pay the fee   | al           | bout how yo                     | u may pay. Typica<br>attorney is submit   | ally, if you are paying                           | the fee yourself,                        | you may pay with cash    | r local court for more details<br>n, cashier's check, or money<br>h a credit card or check with |
|     |  |              |                                 |   |   | e this option, sign                      | and attach the Applica   | ation for Individuals to Pay  |
|     |  |              | •                               | Fee in Installments (Official Form 103A).  that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judequired to, waive your fee, and may do so only if your income is less than 150% of the official povert |   |  |                          |   |
|     |  | b<br>a       | ut is not requ<br>pplies to you | uired to, waive you<br>or family size and y   | ur fee, and may do so<br>you are unable to pay    | only if your incom<br>the fee in install | me is less than 150% of  | of the official poverty line that this option, you must fill out                                |
| 9.  | Have you filed for bankruptcy within the last 8 years?                       | □ No. ■ Yes. |                                 |   |   |  |                          |   |
|     | ·  |              | District                        | ilnbke  | When  | 7/22/13                                  | Case number              | 13-29193  |
|     |  |              | District                        |   | When  |  | Case number              |   |
|     |  |              | District                        |   | When  |  | Case number              |   |
| 10. | Are any bankruptcy<br>cases pending or being<br>filed by a spouse who is     | ■ No         |                                 |   |   |  |                          |   |
|     | not filing this case with you, or by a business partner, or by an affiliate? | □ res.       |                                 |   |   |  |                          |   |
|     |  |              | Debtor                          |   |   |  | Relationship to y        | /ou   |
|     |  |              | District                        |   | When  |  | Case number, if          | known   |
|     |  |              | Debtor                          |   |   |  | Relationship to y        | /ou   |
|     |  |              | District                        | -   | When  |  | Case number, if          | known   |
| 11. | Do you rent your residence?  | □ No.        | Go to li                        | ne 12.  |   |  |                          |   |
|     | . colucilos .  | Yes.         | Has yo                          | ur landlord obtain  | ed an eviction judgme                             | ent against you?                         |                          |   |
|     |  |              |                                 | No. Go to line 12   |   |  |                          |   |
|     |  |              |                                 | Yes. Fill out <i>Initia</i> bankruptcy petition   |   | n Eviction Judgme                        | ent Against You (Form    | 101A) and file it with this   |

Debtor 1 Monica D Fouche Document Page 4 of 79 Case number (if known)

| art | 3: Report About Any Bu  | sinesses                            | You Owr                                 | n as a Sole Propriet  | tor   |  |  |
|-----|---|-------------------------------------|---|---|---|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.                               | Go to                                   | Part 4.   |   |  |  |
|     |   | ☐ Yes.                              | Name                                    | Name and location of business   |   |  |  |
|     | A sole proprietorship is a  |                                     |   |   |   |  |  |
|     | business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                                     |   | e of business, if any   |   |  |  |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |                                     | Numb                                    | Number, Street, City, State & ZIP Code  |   |  |  |
|     | it to this petition.  |                                     | Chec                                    | k the appropriate box   | x to describe your business:  |  |  |
|     |   |                                     |   | Health Care Busin   | ness (as defined in 11 U.S.C. § 101(27A))   |  |  |
|     |   |                                     |   | Single Asset Real   | Estate (as defined in 11 U.S.C. § 101(51B))   |  |  |
|     |   |                                     |   | Stockbroker (as de  | efined in 11 U.S.C. § 101(53A))   |  |  |
|     |   |                                     |   | Commodity Broke   | r (as defined in 11 U.S.C. § 101(6))  |  |  |
|     |   |                                     |   | None of the above   |   |  |  |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?                           | deadlines<br>operation<br>in 11 U.S | s. If you in<br>is, cash-f<br>i.C. 1116 | filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate it. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure inc. 1116(1)(B). |   |  |  |
|     | For a definition of small   | No.                                 | ı aiii i                                | not filing under Chap   | NCI II.   |  |  |
|     | business debtor, see 11 U.S.C. § 101(51D).  | □ No.                               | I am t<br>Code                          | •   | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |  |
|     |   | ☐ Yes.                              | I am 1                                  | filing under Chapter  | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |
| art | 4: Report if You Own or   | Have Any                            | Hazardo                                 | ous Property or Any   | y Property That Needs Immediate Attention   |  |  |
| 14. | Do you own or have any  | ■ No.                               |   |   |   |  |  |
|     | property that poses or is<br>alleged to pose a threat<br>of imminent and  | ☐ Yes.                              | What is                                 | the hazard?   |   |  |  |
|     | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?                        |                                     |   | diate attention is why is it needed?  |   |  |  |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?                 |                                     | Where i                                 | s the property?   | Number Chart City Other 9 7's Code  |  |  |
|     |   |                                     |   |   | Number, Street, City, State & Zip Code  |  |  |

Debtor 1 Monica D Fouche Document Page 5 of 79 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

About D

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

|         |                 | Document | Page 6 of 79           |  |
|---------|-----------------|----------|------------------------|--|
| ebtor 1 | Monica D Fouche |          | Case number (if known) |  |

| Par | 6: Answer These Questi  | ons for Re              | eporting Purposes   |   |   |         |  |  |
|-----|---|-------------------------|---|---|---|---------|--|--|
| 16. | What kind of debts do you have?   | 16a.                    | Are your debts primarily consuindividual primarily for a personal,        |   | are defined in 11 U.S.C. § 101(8) as "incurre"  | d by an |  |  |
|     |   |                         | ☐ No. Go to line 16b.   |   |   |         |  |  |
|     |   |                         | Yes. Go to line 17.   |   |   |         |  |  |
|     |   | 16b.                    | Are your debts primarily busines money for a business or investme         |   |   |         |  |  |
|     |   |                         | □ No. Go to line 16c.   |   |   |         |  |  |
|     |   |                         | ☐ Yes. Go to line 17.   |   |   |         |  |  |
|     |   | 16c.                    | State the type of debts you owe the                                       | nat are not consumer debts or b   | pusiness debts  |         |  |  |
| 17. | Are you filing under<br>Chapter 7?  | ■ No.                   | I am not filing under Chapter 7. G  | o to line 18.   |   |         |  |  |
|     | Do you estimate that after any exempt property is excluded and  | ☐ Yes.                  |   | ing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expense d that funds will be available to distribute to unsecured creditors? |   | xpenses |  |  |
|     | administrative expenses   |                         | □No   |   |   |         |  |  |
|     | are paid that funds will be available for distribution to unsecured creditors?  How many Creditors do |                         | ☐ Yes   |   |   |         |  |  |
| 18. | How many Creditors do   | □ 1-49                  |   | <b>1</b> ,000-5,000   | <b>2</b> 5,001-50,000   |         |  |  |
|     | you estimate that you owe?  | 50-99                   |   | ☐ 5001-10,000<br>☐ 40,004.05.000  | 50,001-100,000  |         |  |  |
|     |   | ☐ 100-19<br>☐ 200-99    |   | □ 10,001-25,000   | ☐ More than100,000  |         |  |  |
| 19. | How much do you estimate your assets to be worth?   | □ \$100,0               | 50,000<br>01 - \$100,000<br>001 - \$500,000<br>001 - \$1 million          | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million   | n   |         |  |  |
| 20  | How much do you   |                         |   | □ \$1,000,001 \$10 million  | П Ф500 000 004 . Ф4 hillion   |         |  |  |
| 20. | estimate your liabilities   | □ \$0 - \$9<br>■ \$50.0 | 01 - \$100,000  | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million  | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billior                            | n       |  |  |
|     | to be?  | □ \$100,0               | 001 - \$500,000<br>001 - \$1 million                                      | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million  | n \$10,000,000,001 - \$50 billio  |         |  |  |
| Par | :7: Sign Below  |                         |   |   |   |         |  |  |
| For | you   | I have ex               | amined this petition, and I declare                                       | under penalty of perjury that the   | e information provided is true and correct.   |         |  |  |
|     |   |                         |   |   | eligible, under Chapter 7, 11,12, or 13 of title and I choose to proceed under Chapter 7. | ÷11,    |  |  |
|     |   |                         | ney represents me and I did not pa<br>t, I have obtained and read the not |   | no is not an attorney to help me fill out this 2(b).                                      |         |  |  |
|     |   | I request               | relief in accordance with the chapt                                       | er of title 11, United States Cod   | de, specified in this petition.   |         |  |  |
|     |   | bankrupto<br>and 3571   | cy case can result in fines up to \$20.                                   |   | noney or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 134 |         |  |  |
|     |   |                         | ca D Fouche  D Fouche   | Signature of  | Debtor 2  |         |  |  |
|     |   |                         | of Debtor 1   | oignature of  |   |         |  |  |
|     |   | Executed                | on December 29, 2017<br>MM / DD / YYYY                                    | Executed on   | MM / DD / YYYY  |         |  |  |

Debtor 1 Monica D Fouche

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jason Blust, Law Office of Jason Blust Date December 29, 2017 |           |               |                |  |  |  |
|---|-----------|---------------|----------------|--|--|--|
| Signature of Attorney for Debtor                                  |           |               | MM / DD / YYYY |  |  |  |
| Jason Blust, Law Office of Jason Blust #6276382                   |           |               |                |  |  |  |
| Printed name  |           |               |                |  |  |  |
| Law Office of Jason Blust, LLC                                    |           |               |                |  |  |  |
|   | Firm name |               |                |  |  |  |
| 211 W Wacker Drive  |           |               |                |  |  |  |
| STE 300   |           |               |                |  |  |  |
| Chicago, IL 60606   |           |               |                |  |  |  |
| Number, Street, City, State & ZIP Code                            |           |               |                |  |  |  |
| Contact phone (312) 273-5001                                      |           | Email address |                |  |  |  |
| #6276382  |           |               |                |  |  |  |
| Bar number & State  |           |               |                |  |  |  |

|                     |                          | Docume            | ent Page 8 of 79 |                       |
|---------------------|--------------------------|-------------------|------------------|-----------------------|
| Fill in this infor  | mation to identify your  | case:             |                  |                       |
| Debtor 1            | Monica D Fouche          |                   |                  |                       |
|                     | First Name               | Middle Name       | Last Name        |                       |
| Debtor 2            |                          |                   |                  |                       |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |                       |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |                       |
| Case number         |                          |                   |                  |                       |
| (if known)          |                          |                   |                  | ☐ Check if this is an |
|                     |                          |                   |                  | amended filing        |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your a       | ssets<br>of what you own      |
|-----|--|--------------|-------------------------------|
|     |  | value        | or what you own               |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$           | 0.00                          |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$           | 30,210.00                     |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$           | 30,210.00                     |
| Par | t 2: Summarize Your Liabilities  |              |                               |
|     |  |              | <b>abilities</b><br>t you owe |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 38,839.00                     |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$           | 0.00                          |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$           | 33,746.93                     |
|     | Your total liabilities   | \$           | 72,585.93                     |
| Par | t 3: Summarize Your Income and Expenses  |              |                               |
| 4.  | Schedule I: Your Income (Official Form 106I)   |              |                               |
|     | Copy your combined monthly income from line 12 of Schedule I   | \$           | 3,972.00                      |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$           | 3,822.00                      |
| Par | 4: Answer These Questions for Administrative and Statistical Records   |              |                               |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?   |              |                               |
|     | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you   | ur other sch | nedules.                      |
|     | ■ Yes  |              |                               |
| 7.  | What kind of debt do you have?   |              |                               |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

6,023.72 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

Document Page 10 of 79 Fill in this information to identify your case and this filing: Debtor 1 Monica D Fouche First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevy 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Equinox Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2016 Debtor 2 only Current value of the Current value of the 14000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$28,000.00 \$28,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$28,000,00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

Case 17-38295 Doc 1 Filed 12/29/17 Entered 12/29/17 11:59:05 Desc Main Document Page 11 of 79 Debtor 1 , Case number *(if known)* Monica D Fouche Yes. Describe..... \$850.00 Miscellaneous used household goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$500.00 TVs 8. Collectibles of value Examples: Antiques and figurines: paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Personal Used Clothing \$700.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 Miscellaneous costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,150.00 for Part 3. Write that number here .....

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

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Case number (if known) Document

Monica D Fouche claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... 17.1. Checking account with Bank of America \$60.00 17.2. Checking account with Academy \$0.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Institution name: Type of account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. ..... Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them...

Debtor 1

|     |                 | Case 17-3829  | 95 Doc 1                             | Filed 12/29/17<br>Document                           | Entered 12/29/17 11:59:05<br>Page 13 of 79              | Desc Main   |
|-----|-----------------|---|--------------------------------------|--|---|---|
| D   | ebtor 1         | Monica D Fouche   |                                      | Document   | Case number (if known)                                  |   |
| 26  | Example ■ No    |   | ames, websites, p                    | ts, and other intellecturoceeds from royalties a     | al property nd licensing agreements                     |   |
| 27. | Exampl<br>■ No  | es, franchises, and or<br>les: Building permits, or<br>Give specific informat | exclusive licenses                   |  | n holdings, liquor licenses, professional licens        | es  |
| M   | oney or p       | property owed to you  | 1?                                   |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28  | ■ No            | unds owed to you  Give specific information                                   | on about them, inc                   | cluding whether you alre                             | ady filed the returns and the tax years                 |   |
| 29. | ■ No            |   | , ,                                  | usal support, child suppo                            | ort, maintenance, divorce settlement, property          | settlement  |
| 30  | Example No      |   | sability insurance poans you made to |  | efits, sick pay, vacation pay, workers' comper          | nsation, Social Security  |
| 31. |                 | s in insurance polici<br>les: Health, disability,                             |                                      | nealth savings account (                             | HSA); credit, homeowner's, or renter's insurar          | nce   |
|     | ■ Yes. N        | Name the insurance co   | ompany of each po<br>Company name:   | olicy and list its value.                            | Beneficiary:  | Surrender or refund value:  |
| _   |                 |   | Employer - Tern<br>surrender value   | n Life Insurance - no o                              | cash  | \$0.00  |
| 32  | If you a someon |   | a living trust, expec                | someone who has die<br>t proceeds from a life in     | od<br>surance policy, or are currently entitled to rece | eive property because   |
| 33. | Example No      |   | yment disputes, in                   | you have filed a lawsui<br>surance claims, or rights | it or made a demand for payment<br>to sue               |   |
| 34  | ■ No            | ontingent and unliqu  |                                      | every nature, including                              | g counterclaims of the debtor and rights to             | set off claims  |
| 35  | . Any fina      | ancial assets you did   | d not already list                   |  |   |   |

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| Deb          | INIONICA D FOUCHE   |                               | Case number (if known)       |             |
|--------------|---|-------------------------------|------------------------------|-------------|
| 36.          | Add the dollar value of all of your entries from Part 4, includ for Part 4. Write that number here  |                               |                              | \$60.00     |
| Part         | 5: Describe Any Business-Related Property You Own or Have an Int  | terest In. List any real esta | te in Part 1.                |             |
| 87. D        | o you own or have any legal or equitable interest in any business-rela  | ated property?                |                              |             |
|              | No. Go to Part 6.   |                               |                              |             |
|              | Yes. Go to line 38.   |                               |                              |             |
| Part         | 6: Describe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.                           | ou Own or Have an Interes     | t In.                        |             |
| 16. <b>[</b> | Oo you own or have any legal or equitable interest in any farn  | n- or commercial fishin       | g-related property?          |             |
|              | No. Go to Part 7.   |                               |                              |             |
|              | ☐ Yes. Go to line 47.   |                               |                              |             |
| Part         | 7: Describe All Property You Own or Have an Interest in That Y  | ou Did Not List Above         |                              |             |
|              | Do you have other property of any kind you did not already lise Examples: Season tickets, country club membership No Yes. Give specific information | st?                           |                              |             |
| 54.          | Add the dollar value of all of your entries from Part 7. Write  | that number here              |                              | \$0.00      |
| Part         | 8: List the Totals of Each Part of this Form  |                               |                              |             |
| 55.          | Part 1: Total real estate, line 2   |                               |                              | \$0.00      |
| 56.          | Part 2: Total vehicles, line 5  | \$28,000.00                   | _                            |             |
| 57.          | Part 3: Total personal and household items, line 15   | \$2,150.00                    |                              |             |
| 58.          | Part 4: Total financial assets, line 36   | \$60.00                       |                              |             |
| 59.          | Part 5: Total business-related property, line 45  | \$0.00                        |                              |             |
| 60.          | Part 6: Total farm- and fishing-related property, line 52   | \$0.00                        |                              |             |
| 61.          | Part 7: Total other property not listed, line 54  | + \$0.00                      |                              |             |
| 62.          | Total personal property. Add lines 56 through 61  | \$30,210.00                   | Copy personal property total | \$30,210.00 |
|              |   |                               |                              |             |

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$30,210.00

|                     |                          | 17(7(4)1111)      | 111 1 (1111. 13) (11 13) |  |
|---------------------|--------------------------|-------------------|--------------------------|--|
| Fill in this info   | rmation to identify your | case:             |                          |  |
| Debtor 1            | Monica D Fouche          |                   |                          |  |
|                     | First Name               | Middle Name       | Last Name                |  |
| Debtor 2            |                          |                   |                          |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name                |  |
| United States B     | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS              |  |
| Case number         |                          |                   |                          |  |
| (if known)          |                          |                   |                          |  |

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim |   | Specific laws that allow exemption |
|--|--------------------------------------|-----------------------------------|---|------------------------------------|
|  | Copy the value from<br>Schedule A/B  | Chec                              | ck only one box for each exemption.                             |                                    |
| Miscellaneous used household goods Line from Schedule A/B: 6.1                         | \$850.00                             |                                   | \$850.00  | 735 ILCS 5/12-1001(b)              |
| 2.116 116111 667/64416 77 2.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| TVs Line from Schedule A/B: 7.1  | \$500.00                             |                                   | \$500.00  | 735 ILCS 5/12-1001(b)              |
| Ellie Holli Genedale 743. 1.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Personal Used Clothing Line from Schedule A/B: 11.1                                    | \$700.00                             |                                   | \$700.00  | 735 ILCS 5/12-1001(a)              |
| Ellie IIolii Gonedale 77B. 1111  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Miscellaneous costume jewelry  | \$100.00                             | •                                 | \$100.00  | 735 ILCS 5/12-1001(b)              |
| Life Holli Schedule A/B. 12.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |
| Checking account with Bank of America Line from Schedule A/B: 17.1                     | \$60.00                              |                                   | \$60.00   | 735 ILCS 5/12-1001(b)              |
| Ellic Holli Golledale Alb. 17.1  |                                      |                                   | 100% of fair market value, up to any applicable statutory limit |                                    |

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Debtor 1 Monica D Fouche

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

| Case                                   | 17-38295                       | Doc 1 Filed 12/29/1  | .7 Entere<br>Page 17 | ed 12/29/17 11:5<br>7 of 79                            | 59:05 Desc N   | 1ain                              |
|--|--------------------------------|--|----------------------|--|--|-----------------------------------|
| Fill in this information               | n to identify you              |  | T OUT                | -(1-1-)  |  |                                   |
|  | lonica D Fouch                 | e<br>Middle Name   | Last Name            |  |  |                                   |
| Debtor 2                               |                                |  |                      |  |  |                                   |
| (Spouse if, filing) Fi                 | rst Name                       | Middle Name  | Last Name            |  |  |                                   |
| United States Bankrup                  | otcy Court for the:            | NORTHERN DISTRICT OF I   | ILLINOIS             |  |  |                                   |
| Case number                            |                                |  |                      |  | _  | if this is an<br>ded filing       |
| Official Form 10                       | 06D                            |  |                      |  |  |                                   |
|  |                                | Who Have Claims  | Secure               | d by Property  | ,  | 12/15                             |
|  |                                | If two married people are filing togo<br>out, number the entries, and attach   |                      |  |  |                                   |
| . Do any creditors have                | claims secured by              | your property?   |                      |  |  |                                   |
| ☐ No. Check this                       | box and submit the             | his form to the court with your oth  | er schedules. Y      | ou have nothing else to                                | report on this form.                                   |                                   |
| Yes. Fill in all o                     | f the information I            | below.   |                      |  |  |                                   |
| Part 1: List All Sec                   | cured Claims                   |  |                      |  |  |                                   |
| for each claim. If more the            | an one creditor has            | more than one secured claim, list the<br>a particular claim, list the other credit<br>cal order according to the creditor's na | tors in Part 2. As   | Amount of claim Do not deduct the value of collateral. | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 AmeriCredit/G                      | M Financial                    | Describe the property that secure  | es the claim:        | \$38,839.00  | \$28,000.00  | \$10,839.00                       |
| Creditor's Name                        |                                | 2016 Chevy Equinox 14000   | miles                |  |  |                                   |
| Po Box 183853<br>Arlington, TX 7       |                                | As of the date you file, the claim i apply.  | is: Check all that   |  |  |                                   |
| Number, Street, City,                  |                                | ☐ Contingent   |                      |  |  |                                   |
| Number, Street, Oity,                  | State & Zip Code               | ☐ Unliquidated☐ Disputed   |                      |  |  |                                   |
| Who owes the debt?                     | Check one.                     | Nature of lien. Check all that apply   | y.                   |  |  |                                   |
| ☐ Debtor 1 only ☐ Debtor 2 only        |                                | ☐ An agreement you made (such as mortgage or secured car loan)   |                      |  |  |                                   |
| Debtor 1 and Debtor :                  | 2 only                         | ☐ Statutory lien (such as tax lien, r  | nechanic's lien)     |  |  |                                   |
| At least one of the de                 |                                | ☐ Judgment lien from a lawsuit   | ·                    |  |  |                                   |
| ☐ Check if this claim r community debt |                                | Other (including a right to offset)  | PMSI                 |  |  |                                   |
|  | Opened<br>05/17 Last<br>Active |  |                      |  |  |                                   |
| Date debt was incurred                 | 11/24/17                       | Last 4 digits of account nu  | mber <u>8866</u>     |  |  |                                   |
|  |                                |  |                      |  |  |                                   |

Add the dollar value of your entries in Column A on this page. Write that number here: \$38,839.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$38,839.00

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|                                      |                                      |   | Γ                                    | Ocument                                    | Page 1                      | 8 of 79  |           |   |
|--------------------------------------|--------------------------------------|---|--------------------------------------|--|-----------------------------|--|-----------|---|
| Fill in th                           | is informa                           | tion to identify your o                           | case:                                |  |                             |  |           |   |
| Debtor 1                             |                                      | Monica D Fouche                                   |                                      |  |                             |  |           |   |
|                                      |                                      | First Name  | Middle Nar                           | ne   | Last Name                   |  |           |   |
| Debtor 2                             |                                      | First Name  | Middle Nar                           |  | Last Name                   |  |           |   |
| (Spouse if,                          | illing)                              | riist Naiile                                      | iviluale ival                        | ne   | Last Name                   |  |           |   |
| United S                             | states Bank                          | ruptcy Court for the:                             | NORTHERN                             | DISTRICT OF IL                             | LINOIS                      |  |           |   |
| Case nu                              | mber                                 |   |                                      |  |                             |  |           |   |
| (if known)                           |                                      |   |                                      |  |                             |  |           | Check if this is an                               |
|                                      |                                      |   |                                      |  |                             |  |           | amended filing                                    |
| Officia                              | l Form                               | 106E/F  |                                      |  |                             |  |           |   |
|                                      |                                      | F: Creditors W                                    | ho Have I                            | Insecured                                  | Claims                      |  |           | 12/15   |
|                                      |                                      |   |                                      |  |                             | Part 2 for creditors with NONPRI   | ORITY c   |   |
| Schedule<br>Schedule<br>left. Attacl | G: Executor D: Creditor h the Contir | ry Contracts and Unexpi<br>s Who Have Claims Secu | ired Leases (Off<br>ured by Property | icial Form 106G). I<br>/. If more space is | Do not include needed, copy | contracts on Schedule A/B: Properly any creditors with partially secuthe Part you need, fill it out, num do not file that Part. On the top o | red clair | ns that are listed in entries in the boxes on the |
| Part 1:                              | List All                             | of Your PRIORITY Un                               | secured Claim                        | ıs   |                             |  |           |   |
| 1. Do a                              | ny creditors                         | have priority unsecured                           | d claims against                     | you?                                       |                             |  |           |   |
| ■ N                                  | o. Go to Par                         | t 2.  |                                      |  |                             |  |           |   |
| ☐ Y                                  | es.                                  |   |                                      |  |                             |  |           |   |
| Part 2:                              | List All                             | of Your NONPRIORIT                                | Y Unsecured (                        | Claims                                     |                             |  |           |   |
| 3. Do a                              | ny creditors                         | have nonpriority unsec                            | ured claims aga                      | inst you?                                  |                             |  |           |   |
| □N                                   | o. You have                          | nothing to report in this pa                      | art. Submit this fo                  | rm to the court with                       | your other sche             | edules.  |           |   |
| ■ Y                                  | es.                                  |   |                                      |  |                             |  |           |   |
| unse                                 | cured claim,<br>one creditor         | list the creditor separately                      | for each claim. F                    | For each claim listed                      | d, identify what t          | b holds each claim. If a creditor hat<br>ype of claim it is. Do not list claims<br>three nonpriority unsecured claims                        | already   | included in Part 1. If more                       |
|                                      |                                      |   |                                      |  |                             |  |           | Total claim                                       |
|                                      | Academy<br>Nonpriority C             | Bank<br>Creditor's Name                           |                                      | ast 4 digits of acc                        | count number                | 1017   |           | \$1,282.00  |
|                                      |                                      |   |                                      |  |                             | Opened 10/13/17 Last A   | ctive     |   |
|                                      | P.o. Box 2<br>Kansas C               | ity, MO 64105                                     | '                                    | When was the deb                           | t incurred?                 | 11/17  |           | _   |
|                                      |                                      | et City State Zlp Code                            |                                      | As of the date you                         | file, the claim             | is: Check all that apply   |           |   |
| •                                    | Who incurre                          | ed the debt? Check one.                           |                                      |  |                             |  |           |   |
|                                      | Debtor 1                             | only  | İ                                    | ☐ Contingent                               |                             |  |           |   |
| 1                                    | Debtor 2                             | only  | 1                                    | ☐ Unliquidated                             |                             |  |           |   |
| 1                                    | Debtor 1                             | and Debtor 2 only                                 | ı                                    | ☐ Disputed                                 |                             |  |           |   |
| 1                                    | ☐ At least o                         | one of the debtors and and                        | other -                              | Type of NONPRIOR                           | RITY unsecure               | d claim:   |           |   |
| !                                    | ☐ Check if                           | this claim is for a comn                          | nunity                               | ☐ Student loans                            |                             |  |           |   |
|                                      | debt                                 |   | , l                                  |  |                             | ration agreement or divorce that yo  | ou did no | t   |
|                                      |                                      | subject to offset?                                |                                      | eport as priority cla                      |                             |  |           |   |
|                                      | ■ No                                 |   |                                      | •  | •                           | g plans, and other similar debts   |           |   |
| l                                    | ☐ Yes                                |   | I                                    | Other. Specify                             | Unsecured                   |  |           |   |

Best Case Bankruptcy

Document Page 19 of 79 Debtor 1 Monica D Fouche Case number (if know) 4.2 \$0.00 Academy Bank Last 4 digits of account number 0317 Nonpriority Creditor's Name Opened 3/20/17 Last Active P.o. Box 26458 When was the debt incurred? 10/13/17 Kansas City, MO 64105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify 4.3 Academy Bank N.a Last 4 digits of account number 0317 \$732.00 Nonpriority Creditor's Name Opened 03/17 Last Active P.o. Box 26458 When was the debt incurred? 10/02/17 Kansas City, MO 64105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unsecured ☐ Yes Academy Bank N.a 4.4 Last 4 digits of account number \$0.00 1215 Nonpriority Creditor's Name Opened 12/15 Last Active P.o. Box 26458 7/08/16 When was the debt incurred? Kansas City, MO 64105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

Unsecured

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Debtor 1 Monica D Fouche Case number (if know) 4.5 \$0.00 Academy Bank N.a. Last 4 digits of account number 0615 Nonpriority Creditor's Name Opened 06/15 Last Active P.o. Box 26458 When was the debt incurred? 12/14/15 Kansas City, MO 64105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify 4.6 Academy Bank N.a 0816 Last 4 digits of account number \$0.00 Nonpriority Creditor's Name Opened 08/16 Last Active P.o. Box 26458 When was the debt incurred? 3/20/17 Kansas City, MO 64105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unsecured ☐ Yes 4.7 Acceptance Now Last 4 digits of account number 0769 \$0.00 Nonpriority Creditor's Name Opened 05/15 Last Active Attn: Bankruptcy When was the debt incurred? 5501 Headquarters Dr 8/21/15 Plano, TX 75024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Rental Agreement ☐ Yes

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Debtor 1 Monica D Fouche Case number (if know) 4.8 \$0.00 Ad Astra Recovery Last 4 digits of account number 5457 Nonpriority Creditor's Name 7330 W 33rd Street N Opened 12/15/11 Last Active Ste 118 When was the debt incurred? 7/22/13 Wichita, KS 67205 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Speedycash.Com 161-II ☐ Yes Ally Financial 4.9 Last 4 digits of account number 8596 \$0.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 02/16 Last Active Po Box 380901 When was the debt incurred? 5/25/17 Bloomington, MN 55438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Automobile Other. Specify American General Financial/Springleaf 4.1 2599 \$0.00 0 Last 4 digits of account number Nonpriority Creditor's Name Springleaf Financial/Attn: Bankruptcy Opened 03/15 Last Active De When was the debt incurred? 4/29/16 Po Box 3251 Evansville, IN 47731 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Note Loan ☐ Yes

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Debtor 1 Monica D Fouche Case number (if know) 4.1 \$1,000.00 Americash Loans Last 4 digits of account number Nonpriority Creditor's Name 1798 S Arlington Heights Rd When was the debt incurred? Arlington Heights, IL 60005 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify loan 4.1 AmeriCredit/GM Financial 9587 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/14 Last Active Po Box 183853 When was the debt incurred? 2/23/16 Arlington, TX 76096 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Automobile Other. Specify 4.1 \$1.500.00 Argon Credit 7505 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 10/20/15 Last Active P.o. Box 503430 When was the debt incurred? 7/22/16 San Diego, CA 92150 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify

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Debtor 1 Monica D Fouche Case number (if know) 4.1 \$500.00 Armed Forces Bank N A 0615 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 06/15 Last Active 320 Kansas Ave When was the debt incurred? 6/10/15 Fort Leavenworth, KS 66027 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Unsecured Other. Specify Capital One 4117 \$1,248.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/15 Last Active Attn: General Correspondence/Bankruptcy When was the debt incurred? 12/08/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit Card Other. Specify 4.1 Capital One 2896 \$1,191.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: General Opened 02/15 Last Active Correspondence/Bankruptcy When was the debt incurred? 11/24/17 Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

| Debto    | Monica D Fouche   |  | Case number (if know)                         |         |  |  |  |
|----------|---|--|---|---------|--|--|--|
| 4.1      | Capital One   | Last 4 digits of account number  | 2093  | \$0.00  |  |  |  |
|          | Nonpriority Creditor's Name Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred?  | Opened 4/02/07 Last Active 6/15/13            |         |  |  |  |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                                       | As of the date you file, the claim   | is: Check all that apply                      |         |  |  |  |
|          | Debtor 1 only   | ☐ Contingent   |   |         |  |  |  |
|          | Debtor 2 only   | ☐ Unliquidated   |   |         |  |  |  |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |         |  |  |  |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure   | d claim:                                      |         |  |  |  |
|          | ☐ Check if this claim is for a community  | ☐ Student loans  |   |         |  |  |  |
|          | debt<br>Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims                   | aration agreement or divorce that you did not |         |  |  |  |
|          | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts              |         |  |  |  |
|          | Yes   | ■ Other. Specify Credit Card   |   |         |  |  |  |
| 4.1<br>8 | Cba Collection Bureau  Nonpriority Creditor's Name  | Last 4 digits of account number  | 8377  | \$0.00  |  |  |  |
|          | Po Box 5013<br>Hayward, CA 94540  | When was the debt incurred?  | Opened 2/06/12 Last Active 6/08/12            |         |  |  |  |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                                       | As of the date you file, the claim   |   |         |  |  |  |
|          | Debtor 1 only   |  |   |         |  |  |  |
|          | ☐ Debtor 2 only   | ☐ Unliquidated   | ☐ Unliquidated                                |         |  |  |  |
|          | ☐ Debtor 1 and Debtor 2 only  |  |   |         |  |  |  |
|          | $\square$ At least one of the debtors and another   | ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: |   |         |  |  |  |
|          | ☐ Check if this claim is for a community  | ☐ Check if this claim is for a community ☐ Student loans                       |   |         |  |  |  |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                   |   |         |  |  |  |
|          | No  | Debts to pension or profit-sharing   | g plans, and other similar debts              |         |  |  |  |
|          | Yes   | Other. Specify 11 Charter (  | Communications                                |         |  |  |  |
| 4.1<br>9 | Citibank Nonpriority Creditor's Name  | Last 4 digits of account number  | 5321  | Unknown |  |  |  |
|          | Citicorp Cr Srvs/Centralized<br>Bankruptcy<br>Po Box 790040   | When was the debt incurred?  | Opened 01/02 Last Active 6/20/11              |         |  |  |  |
|          | S Louis, MO 63129  Number Street City State Zlp Code  Who incurred the debt? Check one.                   | As of the date you file, the claim   |   |         |  |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent   |   |         |  |  |  |
|          | Debtor 2 only   | ☐ Unliquidated   |   |         |  |  |  |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |         |  |  |  |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure   | d claim:                                      |         |  |  |  |
|          | ☐ Check if this claim is for a community  | Student loans  | ■ Student loans                               |         |  |  |  |
|          | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims                   |   |         |  |  |  |
|          | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts            |   |         |  |  |  |
|          | ☐ Yes   |  |   |         |  |  |  |

Educational

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| Debt     | or 1 Monica D Fouche   |   | Case number (if know)                         |                |  |  |
|----------|--|---|---|----------------|--|--|
| 4.2<br>0 | Comcast Cable  | Last 4 digits of account number   |   | \$100.00       |  |  |
| <u> </u> | Nonpriority Creditor's Name PO Box 3002                              | When was the debt incurred?   |   | <b>V.00.00</b> |  |  |
|          | Southeastern, PA 19398   | mich was the asst meaned.   |   |                |  |  |
|          | Number Street City State Zlp Code                                    | As of the date you file, the claim  | is: Check all that apply                      |                |  |  |
|          | Who incurred the debt? Check one.                                    |   |   |                |  |  |
|          | Debtor 1 only  | ☐ Contingent  |   |                |  |  |
|          | Debtor 2 only  | ☐ Unliquidated  |   |                |  |  |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |                |  |  |
|          | ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecure  | d claim:                                      |                |  |  |
|          | ☐ Check if this claim is for a community                             | ☐ Student loans   |   |                |  |  |
|          | debt<br>Is the claim subject to offset?                              | Obligations arising out of a separeport as priority claims                      | aration agreement or divorce that you did not |                |  |  |
|          | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts              |                |  |  |
|          | Yes  | Other. Specify utility  |   |                |  |  |
| 4.2      | ComEd  |   |   | \$362.42       |  |  |
| 1        | Nonpriority Creditor's Name  | Last 4 digits of account number   |   | <b>Φ302.42</b> |  |  |
|          | PO Box 6111  | When was the debt incurred?   |   |                |  |  |
|          | Carol Stream, IL 60197   | _   |   |                |  |  |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim  |   |                |  |  |
|          | _  |   |   |                |  |  |
|          | ■ Debtor 1 only  | ☐ Contingent  |   |                |  |  |
|          | Debtor 2 only  | Unliquidated  |   |                |  |  |
|          | Debtor 1 and Debtor 2 only   | Disputed  | d alabas                                      |                |  |  |
|          | At least one of the debtors and another                              | Type of NONPRIORITY unsecure  ☐ Student loans                                   |   |                |  |  |
|          | ☐ Check if this claim is for a community debt                        | _   |   |                |  |  |
|          | Is the claim subject to offset?                                      | Obligations arising out of a separeport as priority claims                      |   |                |  |  |
|          | ■ No   | ☐ Debts to pension or profit-sharing  | g plans, and other similar debts              |                |  |  |
|          | Yes  | Other. Specify utility  |   |                |  |  |
| 4.2      |  |   | 70.40   |                |  |  |
| 2        | Comenity Bank/cathrins   | Last 4 digits of account number   | 7949  | \$0.00         |  |  |
|          | Nonpriority Creditor's Name  |   | Opened 05/16 Last Active                      |                |  |  |
|          | Po Box 182789  | When was the debt incurred?   | 9/02/16                                       |                |  |  |
|          | Columbus, OH 43218  Number Street City State Zlp Code                | As of the date you file, the claim  | is: Check all that apply                      |                |  |  |
|          | Who incurred the debt? Check one.                                    | As of the date you me, the claim  | в. Спеск ан тат арргу                         |                |  |  |
|          | ■ Debtor 1 only  | ☐ Contingent  |   |                |  |  |
|          | ☐ Debtor 2 only  | ☐ Unliquidated  |   |                |  |  |
|          | Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |                |  |  |
|          | ☐ At least one of the debtors and another                            | _ '   |   |                |  |  |
|          | ☐ Check if this claim is for a community                             |   |   |                |  |  |
|          | debt   | ☐ Obligations arising out of a separation agreement or divorce that you did not |   |                |  |  |
|          | Is the claim subject to offset?                                      | report as priority claims   |   |                |  |  |
|          | ■ No   | Debts to pension or profit-sharing  | g plans, and other similar debts              |                |  |  |
|          | ☐ Yes  | ■ Other Specify Charge Acc  | ount  |                |  |  |

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Debtor 1 Monica D Fouche Case number (if know) 4.2 \$180.00 Comenity Bank/Lane Bryant 8531 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/15 Last Active Po Box 182125 When was the debt incurred? 11/09/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Credit One Bank Na 0825 \$394.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/17 Last Active Po Box 98873 When was the debt incurred? 11/26/17 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 \$4,000.00 Cumulus 5021 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 4/03/17 Last Active P.o. Box 845817 When was the debt incurred? 6/15/17 Los Angeles, CA 90084 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify

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Page 27 of 79 Case number (if know) Debtor 1 Monica D Fouche 4.2 **ERC/Enhanced Recovery Corp** 5594 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy Opened 3/15/13 Last Active 8014 Bayberry Rd When was the debt incurred? 4/21/13 Jacksonville, FL 32256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 11 Charter Communications ☐ Yes 4.2 Fingerhut 4034 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Bankruptcy Dept Opened 5/19/15 Last Active 6250 Ridgewood Rd When was the debt incurred? 6/24/16 Saint Cloud, MN 56303 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Genesis Bc/celtic Bank 7150 \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 11/23/16 Last Active Po Box 4499 When was the debt incurred? 12/16 Beaverton, OR 97076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card T Yes

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Case number (if know) Debtor 1 Monica D Fouche 4.2 Heights Finance Co-327 0709 Unknown Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 12/08 Last Active 7707 Knoxville Ave When was the debt incurred? 6/04/09 Peoria, IL 61615 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods And Other Collateral Auto ☐ Yes 4.3 **Huntington Bank** \$1,000.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 41 S. High St - Corporate Headquart When was the debt incurred? Columbus, OH 43287 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify overdraft ☐ Yes 4.3 Jared Galleria/gfs 3267 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/16 Last Active Po Box 4480 When was the debt incurred? 10/20/17 Beaverton, OR 97076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Monica D Fouche Case number (if know) 4.3 Kohls/Capital One 1251 \$293.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Kohls Credit Opened 08/15 Last Active Po Box 3043 When was the debt incurred? 11/16/17 Milwaukee, WI 53201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.3 Law offices of Ari Madoff \$959.51 Last 4 digits of account number 3 Nonpriority Creditor's Name 201 W Lake St When was the debt incurred? #227 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify loan 4.3 Leroys Jewelers 0313 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/16 Last Active Sterling Jewelers, Inc/Attn: Bankruptcy Po Box 1799 When was the debt incurred? 10/20/17 Akron, OH 44309 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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| Debioi   | Monica D Fouche   |  | Case number (if know)                         |            |
|----------|---|--|---|------------|
| 4.3<br>5 | National Credit Adjusters, Llc  | Last 4 digits of account number                            | 7443  | \$3,077.00 |
|          | Nonpriority Creditor's Name<br>327 W 4th Ave<br>Po Box 3023                                 | When was the debt incurred?                                | Opened 10/23/17                               |            |
|          | Hutchinson, KS 67504  Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim                         | is: Check all that apply                      |            |
|          | Debtor 1 only   | ☐ Contingent   |   |            |
|          | Debtor 2 only   | ☐ Unliquidated   |   |            |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:                                      |            |
|          | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|          | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |
|          | No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts             |            |
|          | Yes   | Other. Specify 01 Rise Cre                                 | edit Of Illinois Llc D                        |            |
| 4.3      | Navient   | Last 4 digits of account number                            | 0122  | \$0.00     |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9500                                    | When was the debt incurred?                                | Opened 01/02 Last Active 11/13/15             |            |
|          | Wilkes-Barr, PA 18773  Number Street City State Zlp Code                                    | As of the date you file, the claim                         | is: Check all that apply                      |            |
|          | Who incurred the debt? Check one.   | • •  | ,   |            |
|          | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|          | Debtor 2 only   | ☐ Unliquidated   |   |            |
|          | ☐ Debtor 1 and Debtor 2 only  | Disputed   | d alata.                                      |            |
|          | At least one of the debtors and another   | Type of NONPRIORITY unsecure  Student loans                | d Claim:                                      |            |
|          | ☐ Check if this claim is for a community debt   | _  | aration agreement or divorce that you did not |            |
|          | Is the claim subject to offset?   | report as priority claims                                  | aration agreement of divorce that you did not |            |
|          | No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts             |            |
|          | ☐ Yes   | Other. Specify   |   |            |
|          |   | Educationa   |   |            |
| 4.3      | Navient Nonpriority Creditor's Name   | Last 4 digits of account number                            | 1200  | \$0.00     |
|          | Attn: Bankruptcy<br>Po Box 9500   | When was the debt incurred?                                | Opened 1/22/02 Last Active 5/03/13            |            |
|          | Wilkes-Barr, PA 18873  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                      |            |
|          | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|          | Debtor 2 only   | ☐ Unliquidated   |   |            |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|          | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:                                      |            |
|          | ☐ Check if this claim is for a community  | Student loans  |   |            |
|          | debt<br>Is the claim subject to offset?   | report as priority claims                                  | aration agreement or divorce that you did not |            |
|          | ■ No  | ☐ Debts to pension or profit-sharing                       | ng plans, and other similar debts             |            |
|          | Yes   | Other. Specify   |   |            |
|          |   | Educational  |   |            |

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Debtor 1 Monica D Fouche Case number (if know) 4.3 Numark Credit Union \$1,000.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1654 Terry Drive When was the debt incurred? Joliet, IL 60434 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify overdraft 4.3 OneMain Financial 2599 \$4,800.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Attn: Bankruptcy Department Opened 06/17 Last Active 601 Nw 2nd St #300 6/29/17 When was the debt incurred? Evansville, IN 47708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Note Loan 4.4 OneMain Financial 2599 \$0.00 0 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Department Opened 5/26/16 Last Active 601 Nw 2nd St #300 When was the debt incurred? 6/29/17 Evansville, IN 47708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Secured ☐ Yes

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Case number (if know)

Debtor 1 Monica D Fouche 4.4 Personal Finance 0101 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 3/09/16 Last Active 6392 S Cass Ave When was the debt incurred? 9/06/16 Westmont, IL 60559 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods Secured ☐ Yes 4.4 Personal Finance 7001 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 9/10/15 Last Active 6392 S Cass Ave When was the debt incurred? 3/09/16 Westmont, IL 60559 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $oxed{\square}$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods Secured ☐ Yes 4.4 Personal Finance 3301 Unknown Last 4 digits of account number Nonpriority Creditor's Name Opened 12/16 Last Active 6392 S Cass Ave When was the debt incurred? 5/16/17 Westmont, IL 60559 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Household Goods Secured ☐ Yes

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Case number (if know)

| Debtor   | 1 Monica D Fouche   | ——————————————————————————————————————                        | Case number (if know)                         |            |
|----------|---|---|---|------------|
| 4.4      | Personal Finance Nonpriority Creditor's Name                              | Last 4 digits of account number                               | 4201  | \$0.00     |
|          | 6392 S Cass Ave<br>Westmont, IL 60559                                     | When was the debt incurred?                                   | Opened 9/06/16 Last Active 12/06/16           |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.       | As of the date you file, the claim                            | is: Check all that apply                      |            |
|          | Debtor 1 only   | ☐ Contingent  |   |            |
|          | ☐ Debtor 2 only   | ☐ Unliquidated  |   |            |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |            |
|          | ☐ At least one of the debtors and another                                 | Type of NONPRIORITY unsecured                                 | d claim:                                      |            |
|          | ☐ Check if this claim is for a community                                  | ☐ Student loans   |   |            |
|          | debt Is the claim subject to offset?                                      | ☐ Obligations arising out of a separeport as priority claims  | ration agreement or divorce that you did not  |            |
|          | ■ No  | Debts to pension or profit-sharing                            | g plans, and other similar debts              |            |
|          | Yes   | Other. Specify Household                                      | Goods Secured                                 |            |
| 4.4      | Personal Finance/marin  | Last 4 digits of account number                               | 8818  | \$1,770.00 |
|          | Nonpriority Creditor's Name<br>8211 Town Center Dr<br>Baltimore, MD 21236 | When was the debt incurred?                                   | Opened 05/17 Last Active 11/24/17             |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.       | As of the date you file, the claim                            | is: Check all that apply                      |            |
|          | Debtor 1 only   | ☐ Contingent  |   |            |
|          | Debtor 2 only   | ☐ Unliquidated  |   |            |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |            |
|          | ☐ At least one of the debtors and another                                 | Type of NONPRIORITY unsecured                                 | d claim:                                      |            |
|          | ☐ Check if this claim is for a community                                  | ☐ Student loans   |   |            |
|          | debt Is the claim subject to offset?                                      | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not  |            |
|          | No  | Debts to pension or profit-sharin                             | g plans, and other similar debts              |            |
|          | Yes   | Other. Specify Secured  |   |            |
| 4.4<br>6 | PLS   | Last 4 digits of account number                               |   | \$1,000.00 |
|          | Nonpriority Creditor's Name<br>4838 S. Cicero<br>Chicago, IL 60638        | When was the debt incurred?                                   |   |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.       | As of the date you file, the claim                            | is: Check all that apply                      |            |
|          | Debtor 1 only   | ☐ Contingent  |   |            |
|          | ☐ Debtor 2 only   | ☐ Unliquidated  |   |            |
|          | ☐ Debtor 1 and Debtor 2 only  |   |   |            |
|          | At least one of the debtors and another                                   | Type of NONPRIORITY unsecured                                 | d claim:                                      |            |
|          | ☐ Check if this claim is for a community debt                             |   | aration agreement or divorce that you did not |            |
|          | Is the claim subject to offset?   | report as priority claims                                     | a plane, and other similar debte              |            |
|          | ■ No  | ☐ Debts to pension or profit-sharin                           | g pians, and other similar debts              |            |
|          | ☐ Yes   | Other, Specify loan   |   |            |

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| Jebi     | or i Monica D Fouche  |   | Case number (if know)                         |        |  |  |
|----------|---|---|---|--------|--|--|
| 1.4      | Rise  | Last 4 digits of account number   | 7443  | \$0.00 |  |  |
|          | Nonpriority Creditor's Name Attn: Bankruptcy Oi Box 101808 Fort Worth, TX 76185 | When was the debt incurred?   | Opened 5/03/17 Last Active 6/23/17            |        |  |  |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.            | As of the date you file, the claim  | is: Check all that apply                      |        |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent  |   |        |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |   |        |  |  |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |        |  |  |
|          | ☐ At least one of the debtors and another                                       | Type of NONPRIORITY unsecure  | d claim:                                      |        |  |  |
|          | ☐ Check if this claim is for a community  | ☐ Student loans   |   |        |  |  |
|          | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims                    | aration agreement or divorce that you did not |        |  |  |
|          | ■ No  | Debts to pension or profit-sharing  | g plans, and other similar debts              |        |  |  |
|          | Yes   | Other. Specify Unsecured  |   |        |  |  |
| 4.4<br>8 | Rise Credit   | Last 4 digits of account number   | 1855  | \$0.00 |  |  |
|          | Nonpriority Creditor's Name Attn: Customer Support                              |   | Opened 5/31/16 Last Active                    |        |  |  |
|          | Po Box 101808   | When was the debt incurred?   | 5/01/17                                       |        |  |  |
|          | Fort Worth, TX 76185  |   |   |        |  |  |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.            | As of the date you file, the claim  | is: Check all that apply                      |        |  |  |
|          | _   |   |   |        |  |  |
|          | ■ Debtor 1 only   | Contingent  |   |        |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |   |        |  |  |
|          | Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecure                                      | d alaim.                                      |        |  |  |
|          | At least one of the debtors and another   | Student loans   | u Ciaiiii.                                    |        |  |  |
|          | ☐ Check if this claim is for a community debt                                   | _   | aration agreement or divorce that you did not |        |  |  |
|          | Is the claim subject to offset?   | report as priority claims   | ration agreement or divorce that you did not  |        |  |  |
|          | ■ No  | Debts to pension or profit-sharing  | g plans, and other similar debts              |        |  |  |
|          | Yes   | ■ Other. Specify Unsecured  |   |        |  |  |
| 4.4      | Rise Credit   | Last 4 digits of account number   | 8199  | \$0.00 |  |  |
| 9        | Nonpriority Creditor's Name   |   |   | Ψ0.00  |  |  |
|          | Attn: Customer Support  |   | Opened 11/30/15 Last Active                   |        |  |  |
|          | Po Box 101808<br>Fort Worth, TX 76185   | When was the debt incurred?   | 5/27/16                                       |        |  |  |
|          | Number Street City State Zlp Code   | As of the date you file, the claim  | is: Check all that apply                      |        |  |  |
|          | Who incurred the debt? Check one.   |   |   |        |  |  |
|          | Debtor 1 only   | ☐ Contingent  |   |        |  |  |
|          | Debtor 2 only   | ☐ Unliquidated  |   |        |  |  |
|          | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |   |        |  |  |
|          | ☐ At least one of the debtors and another                                       | Type of NONPRIORITY unsecure  | d claim:                                      |        |  |  |
|          | ☐ Check if this claim is for a community  |   |   |        |  |  |
|          | debt  | Obligations arising out of a separation agreement or divorce that you did not |   |        |  |  |
|          | Is the claim subject to offset?   | report as priority claims  Debts to pension or profit-sharin                  | on plane, and other similar debts             |        |  |  |
|          |   |   | g pians, and other similar debis              |        |  |  |
|          | ☐ Yes   | Other. Specify Unsecured  |   |        |  |  |

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Debtor 1 Monica D Fouche Case number (if know) 4.5 Synchrony Bank/ JC Penneys 1649 \$192.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Attn: Bankruptcy Opened 12/16 Last Active Po Box 965060 When was the debt incurred? 12/08/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.5 Synchrony Bank/ JC Penneys 4068 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/96 Last Active 05/10 When was the debt incurred? Po Box 965060 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.5 Synchrony Bank/Walmart 7473 \$1,009.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 10/15 Last Active Po Box 965060 When was the debt incurred? 11/23/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Case number (if know) Debtor 1 Monica D Fouche 4.5 Synchrony Bank/Walmart 5282 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: Bankruptcy Opened 9/22/08 Last Active Po Box 965060 When was the debt incurred? 11/07/08 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.5 Target 5543 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name C/O Financial & Retail Srvs Opened 1/21/07 Last Active Mailstopn BT POB 9475 When was the debt incurred? 6/22/13 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card ☐ Yes 4.5 Total Loan LLC \$500.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 2174 Gladstone Court When was the debt incurred? Suite E Glendale Heights, IL 60139 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify loan

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Case number (if know)

Debtor 1 Monica D Fouche 4.5 Trident Asset Management 2412 \$44.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? Opened 08/14 Po Box 888424 Atlanta, GA 30356 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Returned Check Ameristar East Chicago ☐ Yes 4.5 Turner Acceptance Crp 1921 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 06/15 Last Active 5900 W Howard St When was the debt incurred? 5/27/16 Skokie, IL 60077 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify 4.5 \$200.00 Village of Lombard Last 4 digits of account number 8 Nonpriority Creditor's Name 235 East Wilson Avenue When was the debt incurred? Lombard, IL 60148 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify tickets

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| ebto | or 1 Monica D Fouche  |  | Case number (if know)                         |          |
|------|---|--|---|----------|
| .5   | Village of Summit   | Last 4 digits of account number                            |   | \$200.00 |
|      | Nonpriority Creditor's Name<br>5810 S Archer Rd   | When was the debt incurred?                                |   |          |
|      | Summit Argo, IL 60501  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                      |          |
|      | Debtor 1 only   | ☐ Contingent   |   |          |
|      | Debtor 2 only   | ☐ Unliquidated   |   |          |
|      | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |          |
|      | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:                                      |          |
|      |   | ☐ Student loans  |   |          |
|      | ☐ Check if this claim is for a community debt  Is the claim subject to offset?              |  | aration agreement or divorce that you did not |          |
|      | ■ No  | ☐ Debts to pension or profit-sharir                        | ng plans, and other similar debts             |          |
|      | Yes   | Other. Specify tickets                                     |   |          |
| 6    | Village of Villa Park   | Last 4 digits of account number                            |   | \$200.00 |
|      | Nonpriority Creditor's Name P.O. Box 577  | When was the debt incurred?                                |   | <u> </u> |
|      | Bedford Park, IL 60499  |  |   |          |
|      | Number Street City State Zlp Code   | As of the date you file, the claim                         | is: Check all that apply                      |          |
|      | Who incurred the debt? Check one.   |  |   |          |
|      | Debtor 1 only   | ☐ Contingent   |   |          |
|      | Debtor 2 only   | ☐ Unliquidated   |   |          |
|      | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |          |
|      | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:                                      |          |
|      | ☐ Check if this claim is for a community  | ☐ Student loans  |   |          |
|      | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
|      | ■ No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts             |          |
|      | Yes   | Other. Specify tickets                                     |   |          |
| 5    | Visa Dept Store National Bank/Macy's  | Last 4 digits of account number                            | 2172  | \$513.00 |
|      | Nonpriority Creditor's Name   | -  | <del></del>                                   |          |
|      | Attn: Bankruptcy  | MI   | Opened 12/16 Last Active                      |          |
|      | Po Box 8053<br>Mason, OH 45040  | When was the debt incurred?                                | 11/16/17                                      |          |
|      | Number Street City State Zlp Code   | As of the date you file, the claim                         | is: Check all that apply                      |          |
|      | Who incurred the debt? Check one.   |  |   |          |
|      | Debtor 1 only   | ☐ Contingent   |   |          |
|      | ☐ Debtor 2 only   | ☐ Unliquidated   |   |          |
|      | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |          |
|      | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:                                      |          |
|      | ☐ Check if this claim is for a community  | ☐ Student loans  |   |          |
|      | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |          |
|      | ■ No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts             |          |
|      | Yes   | ■ Other. Specify Charge Acc                                | count   |          |
|      |   | 5 Specify 5  |   |          |

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| Debto | r 1 Monica D Fouche   |  | Case number (if know)                         |            |
|-------|---|--|---|------------|
| 4.6   | Visa Dept Store National Bank/Macy's  Nonpriority Creditor's Name                         | Last 4 digits of account number  | 9531  | \$0.00     |
|       | Attn: Bankruptcy Po Box 8053 Mason, OH 45040  | When was the debt incurred?  | Opened 6/01/96 Last Active 7/01/13            |            |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.                       | As of the date you file, the claim   | is: Check all that apply                      |            |
|       | Debtor 1 only   | ☐ Contingent   |   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure   | d claim:                                      |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|       | debt<br>Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |
|       | ■ No  | Debts to pension or profit-sharing   | ng plans, and other similar debts             |            |
|       | Yes   | ■ Other. Specify Charge Acc  | count   |            |
| 4.6   | Von Maur, Inc Nonpriority Creditor's Name   | Last 4 digits of account number  | 3244  | \$182.00   |
|       | Attn: Credit Dept<br>6565 Brady St.   | When was the debt incurred?  | Opened 6/19/17 Last Active 9/29/17            |            |
|       | Davenport, IA 52806  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim   | is: Check all that apply                      |            |
|       | Debtor 1 only   | ☐ Contingent   |   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure   | d claim:                                      |            |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |
|       | ■ No  | Debts to pension or profit-sharing   | ng plans, and other similar debts             |            |
|       | Yes   | Other. Specify Charge Acc  | count   |            |
| 4.6   | Wells Fargo Bank Nonpriority Creditor's Name  | Last 4 digits of account number  |   | \$1,000.00 |
|       | 1 Home Campus, Apt X2303-01a Des Moines, IA 50306   | When was the debt incurred?  |   |            |
|       | Number Street City State Zlp Code   | As of the date you file, the claim   | is: Check all that apply                      |            |
|       | Who incurred the debt? Check one.   |  |   |            |
|       | Debtor 1 only   | Contingent   |   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |   |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   | Lateta  |            |
|       | At least one of the debtors and another   | Type of NONPRIORITY unsecure   | d claim:                                      |            |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset?             | <ul><li>☐ Student loans</li><li>☐ Obligations arising out of a separeport as priority claims</li></ul> | aration agreement or divorce that you did not |            |
|       | No  | Debts to pension or profit-sharir  | ng plans, and other similar debts             |            |
|       | ☐ Yes   | ■ Other. Specify overdraft   |   |            |
|       |   | - Outon Opeony   |   |            |

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| Debic    | Monica D Fouche  |   | Case number (if know)                         |            |
|----------|--|---|---|------------|
| 4.6<br>5 | World Finance Corporat   | Last 4 digits of account number   | 9601  | \$3,318.00 |
|          | Nonpriority Creditor's Name  108 Frederick St  | When was the debt incurred?   | Opened 05/17 Last Active 6/26/17              |            |
|          | Greenville, SC 29607  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim  | is: Check all that apply                      |            |
|          | Debtor 1 only  | ☐ Contingent  |   |            |
|          | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only   | ☐ Unliquidated ☐ Disputed   |   |            |
|          | ☐ At least one of the debtors and another☐ Check if this claim is for a community debt     | Type of NONPRIORITY unsecure  Student loans   |   |            |
|          | Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing | aration agreement or divorce that you did not |            |
|          | ■ No □ Yes   | Other. Specify Secured  | g plans, and other similar debts              |            |
| 4.6<br>6 | World Finance Corporat   | Last 4 digits of account number   | 8701  | \$0.00     |
|          | Nonpriority Creditor's Name  108 Frederick St Greenville, SC 29607                         | When was the debt incurred?   | Opened 09/16 Last Active 5/26/17              |            |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.                       | As of the date you file, the claim  | is: Check all that apply                      |            |
|          | Debtor 1 only  | ☐ Contingent  |   |            |
|          | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only   | ☐ Unliquidated☐ Disputed  |   |            |
|          | ☐ At least one of the debtors and another☐ Check if this claim is for a community          | Type of NONPRIORITY unsecure  ☐ Student loans   | d claim:                                      |            |
|          | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims                                      | aration agreement or divorce that you did not |            |
|          | ■ No   | ☐ Debts to pension or profit-sharing  | ng plans, and other similar debts             |            |
|          | Yes  | Other. Specify Secured  |   |            |
| 4.6<br>7 | World Finance Corporat  Nonpriority Creditor's Name  | Last 4 digits of account number   | 8401  | \$0.00     |
|          | 108 Frederick St<br>Greenville, SC 29607   | When was the debt incurred?   | Opened 09/15 Last Active 9/06/16              |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.                        | As of the date you file, the claim  | is: Check all that apply                      |            |
|          | Debtor 1 only  | ☐ Contingent  |   |            |
|          | Debtor 2 only  | Unliquidated  |   |            |
|          | ☐ Debtor 1 and Debtor 2 only   | Disputed  | d alaim.                                      |            |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure  ☐ Student loans   | a ciann:                                      |            |
|          | ☐ Check if this claim is for a community debt  Is the claim subject to offset?             |   | aration agreement or divorce that you did not |            |
|          | No   | Debts to pension or profit-sharir   | ng plans, and other similar debts             |            |
|          | ☐ Yes  | ■ Other. Specify Secured  |   |            |
|          |  | · · · /   |   |            |

Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Monica D Fouche

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Onemain Financial 601 NW Second St. Evansville, IN 47708 On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | 7  | Total Claim |
|--------------|-----|---|-----|----|-------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|              |     |   |     |    | Total Claim |
|              | 6f. | Student loans   | 6f. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 33,746.93   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 33,746.93   |

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|                     |                          | 1700.111116.      | III FAUE 47 ULTS |
|---------------------|--------------------------|-------------------|------------------|
| Fill in this infor  | rmation to identify your | case:             |                  |
| Debtor 1            | Monica D Fouche          |                   |                  |
|                     | First Name               | Middle Name       | Last Name        |
| Debtor 2            |                          |                   |                  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name        |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS      |
| Case number         |                          |                   |                  |
| (if known)          |                          |                   |                  |
|                     |                          |                   |                  |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | whom you have the or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     |           |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | _                                       |
| 2.2 | City      |              | State   | ZIF Code          |   |
|     | Name      |              |   |                   | _                                       |
|     |           |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     |           |              |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.3 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     |           |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     |           |              |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.4 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     |           |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     |           |              |   |                   |   |
|     | City      |              | State   | ZIP Code          |   |
| 2.5 |           |              |   |                   | _                                       |
|     | Name      |              |   |                   |   |
|     |           |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | _                                       |
|     | Oity      |              | Oldio   | 211 0000          |   |

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|--|--|---|---|--|--|
| Fill in thi                              | s information to identify your   | case:   |   |  |  |
| Debtor 1                                 | Monica D Fouche  |   |   |  |  |
| Dahtar 2                                 | First Name   | Middle Name   | Last Name   |  |  |
| Debtor 2<br>(Spouse if, fi               | ling) First Name   | Middle Name   | Last Name   |  |  |
| United St                                | ates Bankruptcy Court for the:   | NORTHERN DISTRICT O   | F ILLINOIS  |  |  |
| Case nun                                 | nber   |   |   |  | ☐ Check if this is an amended filing   |
|  | al Form 106H<br>dule H: Your Code  | ebtors  |   |  | 12/15  |
| people are<br>fill it out, a<br>your nam | e filing together, both are equa   | ally responsible for supply<br>boxes on the left. Attach tl<br>. Answer every question. | ing correct information<br>he Additional Page to th | i. If more space is in the took in the took is page. On the to | rate as possible. If two married<br>needed, copy the Additional Page,<br>op of any Additional Pages, write         |
| 1. 00                                    | you have any codeptors? (II )  | ou are ming a joint case, do  | not list either spouse as                           | a codebior.  |  |
| □ No<br>■ Ye                             |  |   |   |  |  |
|  | thin the last 8 years, have you<br>na, California, Idaho, Louisiana,         |   |   |  |  |
|  | o. Go to line 3.<br>ss. Did your spouse, former spou                         | se, or legal equivalent live w  | vith you at the time?                               |  |  |
| in lin<br>Form                           | e 2 again as a codebtor only if  | that person is a guaranto   | r or cosigner. Make sur                             | e you have listed t  | ng with you. List the person shown<br>the creditor on Schedule D (Official<br>, Schedule E/F, or Schedule G to fil |
|  | Column 1: Your codebtor<br>Name, Number, Street, City, State and Zli         | <sup>2</sup> Code   |   | Column 2: The cr<br>Check all schedul                          | reditor to whom you owe the debt les that apply:   |
| 3.1                                      | Shawn Fouche<br>10041 S. Walnut Terrace<br>Unit 206<br>Palos Hills, IL 60465 |   |   | ■ Schedule D, □ Schedule E/F □ Schedule G _ AmeriCredit/GM     | line <u>2.1</u><br>-, line   |

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| Fill              | in this information to identify your ca  | ase:                       |                                     |           |       |             |               |              |                               |          |
|-------------------|--|----------------------------|-------------------------------------|-----------|-------|-------------|---------------|--------------|-------------------------------|----------|
| Del               | otor 1 Monica D Fo   | uche                       |                                     |           |       |             |               |              |                               |          |
| _                 | otor 2<br>buse, if filing)   |                            |                                     |           | _     |             |               |              |                               |          |
| Uni               | ted States Bankruptcy Court for the  | : NORTHERN DISTRIC         | CT OF ILLINOIS                      |           |       |             |               |              |                               |          |
|                   | se number  |                            | -                                   |           |       |             | k if this is: | -            |                               |          |
| (                 | ,  |                            |                                     |           |       | □ A         |               | ent showin   | g postpetition ollowing date: |          |
| 0                 | fficial Form 106I  |                            |                                     |           |       | M           | M / DD/ Y     | YYYY         |                               |          |
| S                 | chedule I: Your Inc  | ome                        |                                     |           |       |             | , 22, .       |              |                               | 12/15    |
| spo<br>atta<br>Pa | plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  † 1: Describe Employment | r spouse is not filing wi  | ith you, do not inclu               | ıde infor | mati  | on about    | your spo      | ouse. If me  | ore space is                  | needed,  |
| 1.                | Fill in your employment information.   |                            | Debtor 1                            |           |       |             | Debtor 2      | 2 or non-fi  | ling spouse                   |          |
|                   | If you have more than one job, attach a separate page with   | Employment status          | ■ Employed                          |           |       | ☐ Employed  |               |              |                               |          |
|                   | information about additional employers.  | . ,                        | ☐ Not employed                      |           |       |             |               | mployed      |                               |          |
|                   | Include part-time, seasonal, or  | Occupation                 | Reimbursement                       | Manag     | er    |             |               |              |                               |          |
|                   | self-employed work.  | Employer's name            | Orsini Pharmace                     | eutical S | Servi | ces         |               |              |                               |          |
|                   | Occupation may include student or homemaker, if it applies.  | Employer's address         | 1111 Nicholas B<br>Elk Grove Villag |           | 007   |             |               |              |                               |          |
|                   |  | How long employed t        | here? 9 years                       | i         |       |             | _             |              |                               |          |
| Pai               | t 2: Give Details About Mor  | nthly Income               |                                     |           |       |             |               |              |                               |          |
|                   | mate monthly income as of the duse unless you are separated.   | ate you file this form. If | you have nothing to r               | eport for | any   | line, write | \$0 in the    | space. Ind   | clude your noi                | n-filing |
|                   | u or your non-filing spouse have mo<br>e space, attach a separate sheet to   |                            | ombine the information              | n for all | empl  | oyers for t | that perso    | on on the li | nes below. If                 | you need |
|                   |  |                            |                                     |           |       | For Deb     | tor 1         |              | btor 2 or<br>ing spouse       |          |
| 2.                | List monthly gross wages, sala deductions). If not paid monthly,   |                            |                                     | 2.        | \$    | 6,          | 024.00        | \$           | N/A                           |          |
| 3.                | Estimate and list monthly overt  | ime pay.                   |                                     | 3.        | +\$   |             | 0.00          | +\$          | N/A                           |          |
| 4.                | Calculate gross Income. Add lir  | ne 2 + line 3.             |                                     | 4.        | \$    | 6,02        | 24.00         | \$           | N/A                           |          |

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| Deb | tor 1         | Monica D Fouche   | -          | С        | ase nun | nber ( <i>if know</i> | n)  |  |                |              |  |
|-----|---------------|---|------------|----------|---------|-----------------------|-----|--|----------------|--------------|--|
|     |               |   |            |          | For De  | btor 1                |     |  | ebtor          |              |  |
|     | Сор           | y line 4 here   | 4.         | -        | \$      | 6,024.0               | 0   | ************************************** | iling s        | pouse<br>N/A |  |
| 5.  | l ist         | all payroll deductions:   |            |          |         | •                     |     |  |                |              | _  |
| ٥.  |               | • •   | F.o.       |          | \$      | 4 000 0               | ^   | ¢                                      |                | NI/A         |  |
|     | 5a.<br>5b.    | Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans   | 5a.<br>5b. |          | φ<br>\$ | 1,636.0<br>0.0        | _   | \$                                     |                | N/A<br>N/A   | _  |
|     | 5c.           | Voluntary contributions for retirement plans  | 5c.        |          | \$      | 0.0                   | _   | \$                                     |                | N/A          | _  |
|     | 5d.           | Required repayments of retirement fund loans  | 5d.        |          | \$      | 0.0                   | _   | \$                                     |                | N/A          | _  |
|     | 5e.           | Insurance   | 5e.        |          | \$      | 416.0                 | _   | \$                                     |                | N/A          | _  |
|     | 5f.           | Domestic support obligations  | 5f.        |          | \$      | 0.0                   | _   | \$                                     |                | N/A          | _  |
|     | 5g.           | Union dues  | 5g.        | :        | \$      | 0.0                   | _   | \$                                     |                | N/A          |  |
|     | 5h.           | Other deductions. Specify:  | 5h.        |          | \$      | 0.0                   | _   | + \$                                   |                | N/A          | _  |
| 6.  | Add           | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.         | 9        | 5       | 2,052.0               | 0   | \$                                     |                | N/A          | -  |
| 7.  | Cal           | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | 9        | 5       | 3,972.0               | 0   | \$                                     |                | N/A          | <u>.                                    </u> |
| 8.  | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total             |            |          |         |                       |     |  |                |              |  |
|     |               | monthly net income.   | 8a.        |          | \$      | 0.0                   |     | \$                                     |                | N/A          |  |
|     | 8b.           | Interest and dividends  | 8b.        | ;        | \$      | 0.0                   | 0   | \$                                     |                | N/A          | <u>-</u>                                     |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.        | ;        | \$      | 0.0                   | 0   | \$                                     |                | N/A          |  |
|     | 8d.           | Unemployment compensation   | 8d.        | ;        | \$      | 0.0                   | 0   | \$                                     |                | N/A          | <del>-</del>                                 |
|     | 8e.           | Social Security   | 8e.        | ;        | \$      | 0.0                   | 0   | \$                                     |                | N/A          | <u> </u>                                     |
|     | 8f.           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  | 8f.        | ;        | \$      | 0.0                   | 0   | \$                                     |                | N/A          |  |
|     | 8g.           | Pension or retirement income  | <br>8g.    | :        | \$      | 0.0                   | 0   | \$                                     |                | N/A          | _  |
|     | 8h.           | Other monthly income. Specify:  | 8h.        | + :      | \$      | 0.0                   | 0 - | + \$                                   |                | N/A          | <u>-</u>                                     |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$       |         | 0.0                   | 0   | \$                                     |                | N/           | A  |
| 10  | Cal           | culate monthly income. Add line 7 + line 9.   | 10.        | <b>.</b> | 3 0     | 72.00 +               | \$  |  | N/A            | = \$         | 3,972.00                                     |
| 10. |               | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.        | <b>–</b> | 3,3     | 72.00                 | Ψ_  |  | IN/A           |              | 3,972.00                                     |
| 11. | Inclu<br>othe | e all other regular contributions to the expenses that you list in Schedule use contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify: | depe       |          |         |                       |     | •                                      | chedule<br>11. |              | 0.00   |
| 12. |               | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies   |            |          |         |                       |     |  | 12.            | \$           | 3,972.00                                     |
|     |               |   |            |          |         |                       |     |  |                | Combi        | ned<br>ly income                             |
| 13. | Do :          | you expect an increase or decrease within the year after you file this form   | ?          |          |         |                       |     |  |                |              | -  |
|     | _             | No.<br>Yes Explain:   |            |          |         |                       |     |  |                |              |  |

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| Fill       | in this information to identify your case:   |                           |              |                 |   |
|------------|--|---------------------------|--------------|-----------------|---|
| Deb        | Monica D Fouche  |                           |              | k if this is:   |   |
|            | otor 2 ouse, if filing)  |                           |              |                 | ving postpetition chapter the following date: |
| Unit       | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILI  | LINOIS                    | _            | MM / DD / YYYY  |   |
| Coo        |  |                           |              |                 |   |
| 1          | se number<br>nown)   |                           |              |                 |   |
| Of         | fficial Form 106J  |                           |              |                 |   |
| So         | chedule J: Your Expenses   |                           |              |                 | 12/1  |
| Be a       | as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.                         |                           |              |                 |   |
| Par        | t 1: Describe Your Household Is this a joint case?   |                           |              |                 |   |
|            | ■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?  |                           |              |                 |   |
|            | □ No   |                           |              |                 |   |
|            | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expendent  | ses for Separate House    | hold of Debt | or 2.           |   |
| 2.         | Do you have dependents? ☐ No   |                           |              |                 |   |
|            | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent  | •                         |              | Dependent's age | Does dependent live with you?                 |
|            | Do not state the   |                           |              |                 | □ No  |
|            | dependents names.  | Grandson                  |              | 12              | Yes   |
|            |  |                           |              |                 | □ No  |
|            |  |                           |              |                 | ☐ Yes<br>☐ No                                 |
|            |  |                           |              |                 | ☐ Yes   |
|            |  |                           |              |                 | □ No  |
|            |  |                           |              |                 | ☐ Yes   |
| 3.         | Do your expenses include expenses of people other than yourself and your dependents?   |                           |              |                 |   |
| Est<br>exp | t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a sublicable date. |                           |              |                 |   |
| the        | lude expenses paid for with non-cash government assistand value of such assistance and have included it on <i>Schedule</i> ficial Form 106I.)  |                           |              | Your exp        | enses   |
| 4.         | The rental or home ownership expenses for your residence payments and any rent for the ground or lot.  | e. Include first mortgage | e<br>4. \$   |                 | 1,000.00                                      |
|            | If not included in line 4:   |                           |              |                 |   |
|            | 4a. Real estate taxes  |                           | 4a. \$       |                 | 0.00  |
|            | 4b. Property, homeowner's, or renter's insurance   |                           | 4b. \$       |                 | 50.00   |
|            | 4c. Home maintenance, repair, and upkeep expenses  |                           | 4c. \$       |                 | 0.00  |
| _          | 4d. Homeowner's association or condominium dues  |                           | 4d. \$       |                 | 0.00  |
| 5.         | Additional mortgage payments for your residence, such as   | nome equity loans         | 5. \$        |                 | 0.00  |

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| Debt | or 1 Monica D Fouche  | Case num    | ber (if known) |                            |
|------|---|-------------|----------------|----------------------------|
| 6.   | Utilities:  |             |                |                            |
| -    | 6a. Electricity, heat, natural gas  | 6a.         | \$             | 111.00                     |
|      | 6b. Water, sewer, garbage collection  | 6b.         | · ·            | 0.00                       |
|      | 6c. Telephone, cell phone, Internet, satellite, and cable services                                    | 6c.         | ·              | 375.00                     |
|      | 6d. Other. Specify:   | 6d.         | *              | 0.00                       |
|      | Food and housekeeping supplies  | ou.<br>     | ·              |                            |
|      | . •   |             | ·              | 600.00                     |
|      | Childcare and children's education costs  | 8.          | ·              | 100.00                     |
|      | Clothing, laundry, and dry cleaning   | 9.          | · -            | 150.00                     |
|      | Personal care products and services   | 10.         | · ·            | 250.00                     |
|      | Medical and dental expenses   | 11.         | \$             | 50.00                      |
|      | Transportation. Include gas, maintenance, bus or train fare.  | 12.         | ¢              | 300.00                     |
|      | Do not include car payments.  |             | ·              |                            |
|      | Entertainment, clubs, recreation, newspapers, magazines, and books                                    | 13.         | ·              | 0.00                       |
|      | Charitable contributions and religious donations  | 14.         | \$             | 50.00                      |
| -    | Insurance.  |             |                |                            |
|      | Do not include insurance deducted from your pay or included in lines 4 or 20.                         | 45-         | ¢.             | 2.22                       |
|      | 15a. Life insurance   | 15a.        | ·              | 0.00                       |
|      | 15b. Health insurance   | 15b.        | ·              | 0.00                       |
|      | 15c. Vehicle insurance  | 15c.        |                | 106.00                     |
|      | 15d. Other insurance. Specify:  | 15d.        | \$             | 0.00                       |
| 6.   | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.                      | _           |                |                            |
|      | Specify:  | 16.         | \$             | 0.00                       |
|      | Installment or lease payments:  |             |                |                            |
|      | 17a. Car payments for Vehicle 1   | 17a.        | \$             | 580.00                     |
|      | 17b. Car payments for Vehicle 2   | 17b.        | \$             | 0.00                       |
|      | 17c. Other. Specify:  | 17c.        | \$             | 0.00                       |
|      | 17d. Other. Specify:  | 17d.        | \$             | 0.00                       |
|      | Your payments of alimony, maintenance, and support that you did not report as                         | _           | -              |                            |
|      | deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).                       | 18.         | \$             | 100.00                     |
|      | Other payments you make to support others who do not live with you.                                   |             | \$             | 0.00                       |
|      | Specify:  | 19.         |                |                            |
|      | Other real property expenses not included in lines 4 or 5 of this form or on Sched                    | dule I: Yo  | our Income.    |                            |
|      | 20a. Mortgages on other property  | 20a.        |                | 0.00                       |
|      | 20b. Real estate taxes  | 20b.        | \$             | 0.00                       |
|      | 20c. Property, homeowner's, or renter's insurance   | 20c.        | ·              | 0.00                       |
|      | 20d. Maintenance, repair, and upkeep expenses   | 20d.        | ·              | 0.00                       |
|      | 20e. Homeowner's association or condominium dues  | 20e.        |                | 0.00                       |
|      |   |             | ·              |                            |
| 1.   | Other: Specify:   | 21.         | +\$            | 0.00                       |
| 2.   | Calculate your monthly expenses   |             |                |                            |
|      | 22a. Add lines 4 through 21.  |             | \$             | 3.822.00                   |
|      | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2                  |             | \$             | 0,022.00                   |
|      |   |             | ·              | 0.000.00                   |
|      | 22c. Add line 22a and 22b. The result is your monthly expenses.                                       |             | \$             | 3,822.00                   |
| 3.   | Calculate your monthly net income.  |             |                |                            |
|      | 23a. Copy line 12 (your combined monthly income) from Schedule I.                                     | 23a.        | \$             | 3,972.00                   |
|      | 23b. Copy your monthly expenses from line 22c above.  | 23b.        | ·              | 3,822.00                   |
|      | 200. Copy your monthly expended from the 220 above.   | 200.        |                | 3,022.00                   |
|      | 23c. Subtract your monthly expenses from your monthly income.   |             |                |                            |
|      | The result is your <i>monthly net income</i> .  | 23c.        | \$             | 150.00                     |
|      | South to your monthly not moonto.   |             |                |                            |
| 24.  | Do you expect an increase or decrease in your expenses within the year after you                      | ı file this | s form?        |                            |
|      | For example, do you expect to finish paying for your car loan within the year or do you expect your r |             |                | e or decrease because of a |
|      | modification to the terms of your mortgage?   |             |                |                            |
|      | ■ No.   |             |                |                            |
|      | Yes. Explain here:  |             |                |                            |
|      | ☐ 103.   Explain note.  |             |                |                            |

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| Fill in this info   | ormation to identify your                         | case:                    |                             |                         |  |
|---------------------|---|--------------------------|-----------------------------|-------------------------|--|
| Debtor 1            | Monica D Fouche                                   |                          |                             |                         |  |
|                     | First Name  | Middle Name              | Last Name                   |                         |  |
| Debtor 2            |   |                          |                             |                         |  |
| (Spouse if, filing) | First Name  | Middle Name              | Last Name                   |                         |  |
| United States       | Bankruptcy Court for the:                         | NORTHERN DISTRICT        | OF ILLINOIS                 |                         |  |
| Case number         |   |                          |                             |                         |  |
| (if known)          |   |                          |                             |                         | ☐ Check if this is an  |
|                     |   |                          |                             |                         | amended filing   |
|                     |   |                          |                             |                         |  |
|                     |   |                          |                             |                         |  |
| Official Fo         | <u>rm 106Dec</u>                                  |                          |                             |                         |  |
| Declara             | ation About a                                     | n Individual             | Debtor's Sc                 | hedules                 | 12/15  |
| Dediaie             | ation About 6                                     | - IIIaiviaaai            | DCDIOI 3 00                 | ricadics                | 12/13  |
| obtaining mor       |   | n connection with a bank |                             |                         | ment, concealing property, or<br>), or imprisonment for up to 20 |
| s                   | ign Below   |                          |                             |                         |  |
|                     |   |                          |                             |                         |  |
| Did you             | pay or agree to pay some                          | one who is NOT an attor  | rney to help you fill out b | pankruptcy forms?       |  |
| ■ No                |   |                          |                             |                         |  |
| ☐ Yes               | . Name of person                                  |                          |                             | Attach Bankr            | ruptcy Petition Preparer's Notice,                               |
|                     |   |                          |                             | Declaration,            | and Signature (Official Form 119)                                |
|                     |   |                          |                             |                         |  |
|                     | nalty of perjury, I declare are true and correct. | that I have read the sum | mary and schedules file     | d with this declaration | n and  |
| X /s/ M             | lonica D Fouche                                   |                          | X                           |                         |  |
|                     | ica D Fouche                                      |                          | Signature of                | Debtor 2                |  |
|                     | ature of Debtor 1                                 |                          | · ·                         |                         |  |

Date \_\_\_\_\_

Date December 29, 2017

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| F:II :           | this inform   | ation to identify you                       |  |   |  |   |  |  |
|------------------|---|---|--|---|--|---|--|--|
|                  |   | ation to identify you                       |  |   |  |   |  |  |
| Debto            | or 1  | Monica D Fouche                             | Middle Name  | Last Name   |  |   |  |  |
| Debto            | or 2  |   |  |   |  |   |  |  |
| (Spous           | e if, filing)   | First Name                                  | Middle Name  | Last Name   |  |   |  |  |
| Unite            | d States Ban  | kruptcy Court for the:                      | NORTHERN DISTRICT (  | OF ILLINOIS   |  |   |  |  |
| Case<br>(if know | number  |   |  |   |  | Check if this is an                                   |  |  |
|                  |   |   |  |   | a  | mended filing   |  |  |
|                  |   |   |  |   |  |   |  |  |
| <u>Offi</u>      | cial For  | m 107                                       |  |   |  |   |  |  |
| Stat             | tement  | of Financial                                | Affairs for Individ  | duals Filing for B                                    | ankruptcy  | 4/16  |  |  |
| inforn           | nation. If mo<br>er (if known)  | ore space is needed,<br>). Answer every que | attach a separate sheet to   | this form. On the top of any                          | equally responsible for sup<br>vadditional pages, write you    |   |  |  |
| 1. V             |   | current marital statu                       |  |   |  |   |  |  |
|                  | ☐ Married   |   |  |   |  |   |  |  |
|                  | Not marr  | ied   |  |   |  |   |  |  |
| 2. C             | Ouring the last 3 years, have you lived anywhere other than where you live now? |   |  |   |  |   |  |  |
|                  | ■ No<br>□ Yes. List   | all of the places you l                     | ived in the last 3 years. Do no  | ot include where you live now                         | :  |   |  |  |
| 1                | Debtor 1 Price  | or Address:                                 | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | dress:   | Dates Debtor 2<br>lived there                         |  |  |
|                  |   |   |  |   | ity property state or territory<br>co, Texas, Washington and W |   |  |  |
|                  | No  |   |  |   |  |   |  |  |
|                  | Yes. Mak  | ke sure you fill out Scl                    | nedule H: Your Codebtors (Of   | fficial Form 106H).                                   |  |   |  |  |
| Part 2           | Explain   | the Sources of You                          | r Income   |   |  |   |  |  |
| F                | ill in the total  | amount of income yo                         | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including part-                       |  | ndar years?   |  |  |
|                  | ] No  |   |  |   |  |   |  |  |
|                  | Yes. Fill i   | in the details.                             |  |   |  |   |  |  |
|                  |   |   | Debtor 1   |   | Debtor 2   |   |  |  |
|                  |   |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |  |  |
|                  |   | of current year until<br>I for bankruptcy:  | ■ Wages, commissions, bonuses, tips  | \$72,044.06   | ☐ Wages, commissions, bonuses, tips                            | ,   |  |  |
|                  |   |   | ☐ Operating a business   |   | ☐ Operating a business   |   |  |  |

Official Form 107

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Case number (if known) Document

Debtor 1 Monica D Fouche

|     |   |  |   | Debtor 1  |  |   | Debtor 2   |   |   |
|-----|---|--|---|---|--|---|--|---|---|
|     |   | Sources of income<br>Check all that apply.     |   |   | Sources of Check all t   |   | Gross income<br>(before deductions<br>and exclusions)                          |   |   |
|     | last caler<br>nuary 1 to                  | ndar year:<br>December :                       | 31, 2016 )  | ■ Wages, commissions, bonuses, tips   |  | \$64,029.00   | ☐ Wages,<br>bonuses, t   | commissions,<br>ips   |   |
|     |   |  |   | ☐ Operating a business  |  |   | ☐ Operati  | ng a business   |   |
|     |   | dar year bef<br>December :                     |   | ■ Wages, commissions, bonuses, tips   |  | \$64,235.00   | ☐ Wages,<br>bonuses, t   | commissions,<br>ips   |   |
|     |   |  |   | ☐ Operating a business  |  |   | ☐ Operati  | ng a business   |   |
| 5.  | Include in and other winnings.  List each | come regard<br>public benef<br>If you are fili | less of whethit payments; payments; payments; pang a joint case the gross incor   | during this year or the two<br>er that income is taxable. Ex-<br>pensions; rental income; inter<br>e and you have income that y<br>me from each source separa   | amples of<br>rest; divid<br>you receiv   | other income are a<br>ends; money collected<br>red together, list it  | alimony; child<br>cted from laws<br>only once und                              | suits; royalties; a<br>er Debtor 1.   | Security, unemployment,<br>nd gambling and lottery    |
|     |   |  |   | Debtor 1  |  |   | Debtor 2   |   |   |
|     |   |  |   | Sources of income<br>Describe below.  | each   | s income from<br>source<br>e deductions and<br>ions)  | Sources of Describe b  |   | Gross income<br>(before deductions<br>and exclusions) |
| Par | rt 3: Lis                                 | t Certain Pa                                   | yments You  | Made Before You Filed for   | Bankrup  | tcy   |  |   |   |
| 6.  | □ No.                                     | Neither De individual puring the No. Yes       | ebtor 1 nor Deprimarily for a 90 days befor Go to line 7. List below expaid that create not include properties of Debtor 2 or 90 days befor Go to line 7. List below exinclude payr | ach creditor to whom you paiditor. Do not include paymer bayments to an attorney for the on 4/01/19 and every 3 years both have primarily consumer you filed for bankruptcy, diach creditor to whom you painents for domestic support o | umer deb old purpos id you pay id a total o nts for dor this bankru rs after tha umer deb id you pay | e."  / any creditor a tota  of \$6,425* or more mestic support obli- uptcy case. at for cases filed or  ts.  / any creditor a tota  of \$600 or more an | in one or more gations, such or after the dal of \$600 or mediate the total am | or more? e payments and as child support ate of adjustmer nore? ount you paid the | the total amount you and alimony. Also, do at.        |
|     |   |  | attorney for  | this bankruptcy case.   |  |   |  |   |   |
|     | Creditor                                  | 's Name and                                    | I Address   | Dates of payme  | ent  | Total amount paid   | Amount ye  |   | payment for   |

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| 7.   | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                              |                      |                      |                    |                             |  |
|--|--|------------------------------|----------------------|----------------------|--------------------|-----------------------------|--|
|  | No   |                              |                      |                      |                    |                             |  |
|  | Yes. List all payments to an insider.  |                              |                      |                      |                    |                             |  |
|  | Insider's Name and Address   | Dates of payment             | Total amount paid    | Amount you still owe | Reason for         | this payment                |  |
| 8.   | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos   |                              | ments or transfer a  | any property on a    | ccount of a de     | ebt that benefited an       |  |
|  | ■ No □ Yes. List all payments to an insider  |                              |                      |                      |                    |                             |  |
|  | ,,   |                              |                      |                      |                    |                             |  |
|  | Insider's Name and Address   | Dates of payment             | Total amount paid    | Amount you still owe | Include cred       | this payment<br>itor's name |  |
| Pai  | t 4: Identify Legal Actions, Repossession  | ns, and Foreclosures         |                      |                      |                    |                             |  |
| 9.   | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.   |                              |                      |                      |                    |                             |  |
|  | <ul><li>No</li><li>☐ Yes. Fill in the details.</li></ul>   |                              |                      |                      |                    |                             |  |
|  | Case title Case number   | Nature of the case           | Court or agency      |                      | Status of th       | e case                      |  |
| 10.  | Within 1 year before you filed for bankrupt<br>Check all that apply and fill in the details below  |                              | erty repossessed, t  | oreclosed, garnis    | hed, attached      | I, seized, or levied?       |  |
|  | No. Go to line 11.   |                              |                      |                      |                    |                             |  |
|  | ☐ Yes. Fill in the information below.  |                              |                      |                      |                    |                             |  |
|  | Creditor Name and Address  | <b>Describe the Property</b> |                      | Date                 |                    | Value of the                |  |
|  |  | Explain what happened        | d                    |                      |                    | property                    |  |
| 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, accounts or refuse to make a payment because you owed a debt?  No |  |                              |                      | , set off any a      | mounts from your   |                             |  |
|  | ☐ Yes. Fill in the details.  Creditor Name and Address   | Describe the action the      | creditor took        | Date                 | action was         | Amount                      |  |
|  | Creditor Name and Address  | Describe the action the      | e creditor took      | taken                |                    | Amount                      |  |
| 12.  | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  |                              | erty in the possess  | ion of an assigne    | e for the bene     | fit of creditors, a         |  |
|  | ☐ Yes  |                              |                      |                      |                    |                             |  |
| Pai  | t 5: List Certain Gifts and Contributions  |                              |                      |                      |                    |                             |  |
| 13.  | Within 2 years before you filed for bankrup  | otcy, did you give any gift  | s with a total value | of more than \$60    | 0 per person?      | ?                           |  |
|  | <ul><li>No</li><li>☐ Yes. Fill in the details for each gift.</li></ul>   |                              |                      |                      |                    |                             |  |
|  | Gifts with a total value of more than \$600 per person   | Describe the gifts           |                      | Dates<br>the g       | s you gave<br>ifts | Value                       |  |
|  | Person to Whom You Gave the Gift and Address:  |                              |                      |                      |                    |                             |  |

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| 14.  | <ul> <li>Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?</li> <li>No</li> <li>Yes. Fill in the details for each gift or contribution.</li> </ul>   |         |   |                |  |                           |  |
|--|--|---------|---|----------------|--|---------------------------|--|
|  | Yes. Fill in the details for each gift or co<br>Gifts or contributions to charities that t<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code   | total   | Describe what you contributed   |                | Dates you contributed                          | Value                     |  |
| Par  | t 6: List Certain Losses   |         |   |                |  |                           |  |
| 15.  | Within 1 year before you filed for bankru or gambling?   | ptcy or | since you filed for bankruptcy, did y   | you lose anytl | ning because of the                            | ft, fire, other disaster, |  |
|  | ■ No □ Yes. Fill in the details.   |         |   |                |  |                           |  |
|  | Describe the property you lost and how the loss occurred   | Include | be any insurance coverage for the letthe amount that insurance has paid. Let ce claims on line 33 of Schedule A/B:  | _ist pending   | Date of your loss                              | Value of property lost    |  |
| Par  | t 7: List Certain Payments or Transfers  | •       |   |                |  |                           |  |
| <ul> <li>Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |  |         |   |                |  |                           |  |
|  | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You   |         | Description and value of any property transferred   |                | Date payment<br>or transfer was<br>made        | Amount of payment         |  |
|  | Law Office of Jason Blust<br>211 W. Wacker<br>Suite 300<br>Chicago, IL 60606   |         | \$370.00 paid pre-petition toward total<br>attorney fee of \$4,000.00, filing fee of<br>\$310.00, and expenses of \$60.00<br>(\$4,000.00 to be paid in chapter 13 plan) |                | 2017   | \$370.00                  |  |
| 17.  | <ul> <li>17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?</li> <li>Do not include any payment or transfer that you listed on line 16.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |         |   |                |  | rty to anyone who         |  |
|  | Person Who Was Paid<br>Address   |         | Description and value of any prop transferred   | erty           | Date payment or transfer was made              | Amount of payment         |  |
| 18.  | transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  |         |   |                |  |                           |  |
|  | Yes. Fill in the details.  Person Who Received Transfer Address  Person's relationship to you  |         | Description and value of property transferred   |                | nny property or<br>received or debts<br>change | Date transfer was made    |  |
|  |  |         |   |                |  |                           |  |

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| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) |   |   |   |                         |   |           |  |
|-----|---|---|---|---|-------------------------|---|-----------|--|
|     |   | No<br>Yes. Fill in the details.   |   |   |                         |   |           |  |
|     |   | ne of trust   | Description and   | Description and value of the property transferred |                         |   | Date      | Transfer was                               |
|     |   | _   |   |   |                         |   | made      | <i>3</i>                                   |
| Pa  | rt 8:   | List of Certain Financial Accounts, Ins   | struments, Safe Deposi  | t Boxes, and S                                    | torage Unit             | ts  |           |  |
| 20. | sold  | in 1 year before you filed for bankruptcy<br>, moved, or transferred?<br>Ide checking, savings, money market, o                 | •   |   |                         |   |           |  |
|     |   | ses, pension funds, cooperatives, assoc<br>No   |   |   |                         | n, shares in same, orea                                       | t union   | o, brokerage                               |
|     |   | Yes. Fill in the details.   |   |   |                         |   |           |  |
|     |   | ne of Financial Institution and<br>Iress (Number, Street, City, State and ZIP<br>e)   | Last 4 digits of account number                               | Type of acco                                      | ount or                 | Date account was<br>closed, sold,<br>moved, or<br>transferred | bef       | Last balance<br>ore closing or<br>transfer |
| 21. |   | ou now have, or did you have within 1 y<br>, or other valuables?  | ear before you filed fo                                       | r bankruptcy, a                                   | ny safe de <sub>l</sub> | posit box or other depos                                      | itory fo  | or securities,                             |
|     |   | No  |   |   |                         |   |           |  |
|     |   | Yes. Fill in the details.   |   |   |                         |   |           |  |
|     |   | ne of Financial Institution<br>Iress (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code) |   | Describe                | the contents  |           | you still<br>ive it?                       |
| 22. | Have  | you stored property in a storage unit o   |   | r home within 1                                   | l year befor            | re you filed for bankrupt                                     | cy?       |  |
|     |   | No  |   |   |                         |   |           |  |
|     |   | Yes. Fill in the details.   |   |   |                         |   |           |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   |   | to it?  | to it? Address (Number, Street, City,             |                         | Describe the contents   |           | o you still<br>ave it?                     |
| Pai | rt 9:   | Identify Property You Hold or Control   | •   |   |                         |   |           |  |
| 23. |   | ou hold or control any property that sor omeone.  | meone else owns? Incl   | ude any prope                                     | rty you bor             | rowed from, are storing                                       | for, or l | hold in trust                              |
|     | _   | No<br>Yes. Fill in the details.   |   |   |                         |   |           |  |
|     | Owi   | ner's Name<br>Iress (Number, Street, City, State and ZIP Code)  | Where is the proj<br>(Number, Street, City, S<br>Code)        |   | Describe                | the property  |           | Value                                      |
| Pai | rt 10:  | Give Details About Environmental Info   | ,   |   |                         |   |           |  |
| For | the p   | urpose of Part 10, the following definition   | ons apply:  |   |                         |   |           |  |
|     | toxic   | ronmental law means any federal, state,<br>substances, wastes, or material into the<br>lations controlling the cleanup of these | ie air, land, soil, surfac                                    | e water, groun                                    |                         |   |           |  |

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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| 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental lav |  |  |  |                    |  |  |  |  |
|---|--|--|--|--------------------|--|--|--|--|
|   | ■ No □ Yes. Fill in the details.   |  |  |                    |  |  |  |  |
|   | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)       | Environmental law, if you know it                      | Date of notice     |  |  |  |  |
| 25.   | Have you notified any governmental unit of any i   | release of hazardous material?   |  |                    |  |  |  |  |
|   | ■ No<br>□ Yes. Fill in the details.  |  |  |                    |  |  |  |  |
|   | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                      | Date of notice     |  |  |  |  |
| 26.   | Have you been a party in any judicial or adminis   | trative proceeding under any envir   | ronmental law? Include settlements a                   | and orders.        |  |  |  |  |
|   | ■ No □ Yes. Fill in the details.   |  |  |                    |  |  |  |  |
|   | Case Title<br>Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case                                     | Status of the case |  |  |  |  |
| Par   | 11: Give Details About Your Business or Conr   | nections to Any Business   |  |                    |  |  |  |  |
| 27.   | Within 4 years before you filed for bankruptcy, d  | lid you own a business or have any   | y of the following connections to any                  | y business?        |  |  |  |  |
|   | ☐ A sole proprietor or self-employed in a tr   | rade, profession, or other activity,                                       | either full-time or part-time                          |                    |  |  |  |  |
|   | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |  |  |                    |  |  |  |  |
|   | ☐ A partner in a partnership   |  |  |                    |  |  |  |  |
|   | ☐ An officer, director, or managing executive of a corporation   |  |  |                    |  |  |  |  |
|   | ☐ An owner of at least 5% of the voting or €   | equity securities of a corporation   |  |                    |  |  |  |  |
|   | ■ No. None of the above applies. Go to Part 1  | 2.   |  |                    |  |  |  |  |
|   | ☐ Yes. Check all that apply above and fill in th   | ne details below for each business   |  |                    |  |  |  |  |
|   |  | scribe the nature of the business  | Employer Identification numbe                          |                    |  |  |  |  |
|   | Address<br>(Number, Street, City, State and ZIP Code)  | ne of accountant or bookkeeper   | Do not include Social Security  Dates business existed | number or IIIN.    |  |  |  |  |
| 28.   | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. |  |  |                    |  |  |  |  |
|   | ■ No<br>□ Yes. Fill in the details below.  |  |  |                    |  |  |  |  |
|   | Name Address (Number, Street, City, State and ZIP Code)  | e Issued   |  |                    |  |  |  |  |
|   |  |  |  |                    |  |  |  |  |

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| Part 12: Sign Below                       |   |  |
|---|---|--|
| are true and correct. I understand that i | ent of Financial Affairs and any attachments, and I denaking a false statement, concealing property, or obtes up to \$250,000, or imprisonment for up to 20 years | taining money or property by fraud in connection |
| /s/ Monica D Fouche                       |   |  |
| Monica D Fouche                           | Signature of Debtor 2   |  |
| Signature of Debtor 1                     | -   |  |
| Date December 29, 2017                    | Date  |  |
| Did you attach additional pages to You    | Statement of Financial Affairs for Individuals Filing   | for Bankruptcy (Official Form 107)?              |
| No  |   |  |
| □ Yes                                     |   |  |
| Did you pay or agree to pay someone w     | ho is not an attorney to help you fill out bankruptcy   | forms?   |
| No  |   |  |

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |  |
|------------|--------------------|--|
| \$245      | filing fee         |  |
| \$75       | administrative fee |  |
| + \$15     | trustee surcharge  |  |
| \$335      | total fee          |  |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing tee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

## RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

#### (Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

## C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
  - ☑ The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
  - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
    - The Debtor(s) and Attorney have entered into an advance payment retainer for pre-filing and pre-confirmation work including, but not limited to, pre-filing bankruptcy advice, preparation of the petition and Chapter 13 plan, pre-filing bankruptcy planning, filing of the case, and any amendments necessary for confirmation. Pre-filing work is performed periodically as payments are received.
  - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
  - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$370.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$370.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:December 29, 2017 |   |
|------------------------|---|
| Signed:                |   |
| Monica D Fouche        | Jason Blust, Law Office of Jason Blust #6276382 |
|                        | Attorney for the Debtor(s)                      |
| Debtor(s)              |   |

**Local Bankruptcy Form 23c** 

Do not sign this agreement if the amounts are blank.

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B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

| In r  | e Monica D Fouche  |   | Case No.         |                                     |  |  |
|---|--|---|------------------|-------------------------------------|--|--|
|   |  | Debtor(s)   | Chapter          | 13                                  |  |  |
|   | DISCLOSURE OF COMPENS  | ATION OF ATTORN   | EY FOR DI        | EBTOR(S)                            |  |  |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |  |   |                  |                                     |  |  |
|   | For legal services, I have agreed to accept  |   | \$               | 4,000.00                            |  |  |
|   | Prior to the filing of this statement I have received  |   | \$               | 0.00                                |  |  |
|   | Balance Due  |   | \$               | 4,000.00                            |  |  |
| 2.  | The source of the compensation paid to me was:   |   |                  |                                     |  |  |
|   | ■ Debtor □ Other (specify):  |   |                  |                                     |  |  |
| 3.  | The source of compensation to be paid to me is:  |   |                  |                                     |  |  |
|   | ■ Debtor □ Other (specify):  |   |                  |                                     |  |  |
| 4.  | ■ I have not agreed to share the above-disclosed compens   | ation with any other person unle  | ss they are mem  | bers and associates of my law firm. |  |  |
|   | ☐ I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names  |   |                  |                                     |  |  |
| 5.  | In return for the above-disclosed fee, I have agreed to rende  | er legal service for all aspects of   | the bankruptcy o | case, including:                    |  |  |
|   | <ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;</li> <li>e. [Other provisions as needed]</li> <li>In Chapter 13 cases, the Court-Approved Retention Agreement is hereby incorporated by reference.</li> </ul> |   |                  |                                     |  |  |
| 6.  | By agreement with the debtor(s), the above-disclosed fee do  | es not include the following ser  | vice:            |                                     |  |  |
|   |  | CERTIFICATION   |                  |                                     |  |  |
| this  | I certify that the foregoing is a complete statement of any agbankruptcy proceeding.   | greement or arrangement for pay   | ment to me for r | epresentation of the debtor(s) in   |  |  |
| _   | December 29, 2017 Date   | /s/ Jason Blust, Law C<br>Jason Blust, Law Offic<br>Signature of Attorney<br>Law Office of Jason B<br>211 W Wacker Drive<br>STE 300<br>Chicago, IL 60606<br>(312) 273-5001 Fax: | e of Jason Blu   | st #6276382                         |  |  |

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

### A. BEFORE THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

# C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
  - The Debtor(s) and Attorney have entered into an advance payment retainer for pre-filing and pre-confirmation work including, but not limited to, pre-filing bankruptcy advice, preparation of the petition and Chapter 13 plan, pre-filing bankruptcy planning, filing of the case, and any amendments necessary for confirmation. Pre-filing work is performed periodically as payments are received.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

## F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of  $\frac{370.00}{}$ .
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$370.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: December 29, 2017
Signed:

Monica D Fouche

Jason Blust, Law Office of Jason Blust #6276382

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

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### United States Bankruptcy Court Northern District of Illinois

| In re | Monica D Fouche                                  |   | Case No.                       |               |
|-------|--|---|--------------------------------|---------------|
|       |  | Debtor(s)   | Chapter <u>13</u>              |               |
|       | VERIFICATION OF CREDITOR MATRIX                  |   |                                |               |
|       |  | Number of   | Number of Creditors: 53        |               |
|       | The above-named Debtor(s) herel (our) knowledge. | by verifies that the list of credit                       | ors is true and correct to the | ne best of my |
| Date: | December 29, 2017                                | /s/ Monica D Fouche  Monica D Fouche  Signature of Debtor |                                |               |

Academy Bank P.o. Box 26458 Kansas City, MO 64105

Academy Bank N.a P.o. Box 26458 Kansas City, MO 64105

Acceptance Now Attn: Bankruptcy 5501 Headquarters Dr Plano, TX 75024

Ad Astra Recovery 7330 W 33rd Street N Ste 118 Wichita, KS 67205

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

American General Financial/Springleaf Fi Springleaf Financial/Attn: Bankruptcy De Po Box 3251 Evansville, IN 47731

Americash Loans 1798 S Arlington Heights Rd Arlington Heights, IL 60005

AmeriCredit/GM Financial Po Box 183853 Arlington, TX 76096

Argon Credit P.o. Box 503430 San Diego, CA 92150

Armed Forces Bank N A 320 Kansas Ave Fort Leavenworth, KS 66027

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cba Collection Bureau Po Box 5013 Hayward, CA 94540

Citibank Citicorp Cr Srvs/Centralized Bankruptcy Po Box 790040 S Louis, MO 63129

Comcast Cable PO Box 3002 Southeastern, PA 19398

ComEd PO Box 6111 Carol Stream, IL 60197

Comenity Bank/cathrins Po Box 182789 Columbus, OH 43218

Comenity Bank/Lane Bryant Attn: Bankruptcy Po Box 182125 Columbus, OH 43218

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Cumulus P.o. Box 845817 Los Angeles, CA 90084

ERC/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Rd Jacksonville, FL 32256 Fingerhut
Bankruptcy Dept
6250 Ridgewood Rd
Saint Cloud, MN 56303

Genesis Bc/celtic Bank Po Box 4499 Beaverton, OR 97076

Heights Finance Co-327 7707 Knoxville Ave Peoria, IL 61615

Huntington Bank 41 S. High St - Corporate Headquart Columbus, OH 43287

Jared Galleria/gfs Po Box 4480 Beaverton, OR 97076

Kohls/Capital One Kohls Credit Po Box 3043 Milwaukee, WI 53201

Law offices of Ari Madoff 201 W Lake St #227 Chicago, IL 60606

Leroys Jewelers Sterling Jewelers, Inc/Attn: Bankruptcy Po Box 1799 Akron, OH 44309

National Credit Adjusters, Llc 327 W 4th Ave Po Box 3023 Hutchinson, KS 67504

Navient Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18773 Navient Attn: Bankruptcy Po Box 9500 Wilkes-Barr, PA 18873

Numark Credit Union 1654 Terry Drive Joliet, IL 60434

OneMain Financial Attn: Bankruptcy Department 601 Nw 2nd St #300 Evansville, IN 47708

Onemain Financial 601 NW Second St. Evansville, IN 47708

Personal Finance 6392 S Cass Ave Westmont, IL 60559

Personal Finance/marin 8211 Town Center Dr Baltimore, MD 21236

PLS 4838 S. Cicero Chicago, IL 60638

Rise Attn: Bankruptcy Oi Box 101808 Fort Worth, TX 76185

Rise Credit Attn: Customer Support Po Box 101808 Fort Worth, TX 76185

Shawn Fouche 10041 S. Walnut Terrace Unit 206 Palos Hills, IL 60465 Synchrony Bank/ JC Penneys Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Target C/O Financial & Retail Srvs Mailstopn BT POB 9475 Minneapolis, MN 55440

Total Loan LLC 2174 Gladstone Court Suite E Glendale Heights, IL 60139

Trident Asset Management Attn: Bankruptcy Po Box 888424 Atlanta, GA 30356

Turner Acceptance Crp 5900 W Howard St Skokie, IL 60077

Village of Lombard 235 East Wilson Avenue Lombard, IL 60148

Village of Summit 5810 S Archer Rd Summit Argo, IL 60501

Village of Villa Park P.O. Box 577 Bedford Park, IL 60499

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Von Maur, Inc Attn: Credit Dept 6565 Brady St. Davenport, IA 52806

Wells Fargo Bank 1 Home Campus, Apt X2303-01a Des Moines, IA 50306

World Finance Corporat 108 Frederick St Greenville, SC 29607